SUPERVISORY COMMITTEE FORM
Microbiology and Cell Science M.S. Program

Fill out and return to the MCS Main Office in Room 1052

STUDENT NAME: ___________________________________________

UF ID NUMBER: ___________________________________________

DATE: ________________________________________________

Master’s Degree Committee Requirements:
• 2 Microbiology and Cell Science Graduate Faculty Members (including the chairman)
• Students pursuing a non-thesis M.S. degree do NOT require a supervisory committee, but the major professor should still be indicated on this form and submitted to the MCS main office.

CHAIRMAN:

MEMBER:

MEMBER:

Contact Jonathan Orsini at 352-846-1330 or jorsini@ufl.edu if you have any questions.