

# 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](mailto:jorsini@ufl.edu) if you have any questions.