Iowa State University Department of Chemistry Program of Study Committee Agreement form

Student name:		
Student name:(last)	(first)	(middle)
We, the undersigned, have met above listed student.	t with and agreed to be in the	e POS committee for the
Major area:		
Student signature:		
		(date)
Committee Members: Please p	rint name and sign:	
Major Professor signature:		
Committee Member signature:		
Committee Member signature:		
Committee Member signature:		
Committee Member signature:		
Committee Member signature:		