

**UNIVERSITY OF FLORIDA COLLEGE OF ENGINEERING  
DIVISION OF STUDENT AFFAIRS**

**APPOINTMENT OF SUPERVISORY COMMITTEE  
FOR GRADUATION \_\_\_\_\_ CUM LAUDE**

**DATE:** \_\_\_\_\_

**TO:** Associate Dean of the College of Engineering

**NAME:** \_\_\_\_\_ **UFID:** \_\_\_\_\_

has been approved by the Department of \_\_\_\_\_

to pursue the degree of Bachelor of Science in \_\_\_\_\_

\_\_\_\_\_ **CUM LAUDE.** The following faculty members are  
recommended as the Supervisory Committee.

<b>NAME</b>	<b>FIELD</b>
_____	_____
<b>Chair</b>	
_____	_____
_____	_____
_____	_____

**External Member**

**RECOMMENDED BY:**

**APPROVED BY:**

\_\_\_\_\_  
**DEPARTMENT CHAIR**

\_\_\_\_\_  
**ASSOCIATE DEAN FOR THE  
COLLEGE OF ENGINEERING**