

North Carolina State University  
The Graduate School

**ADVISORY COMMITTEE MODIFICATION**

☒ Replacement, ☐ Substitution, ☐ Addition, ☐ Deletion, or ☐ Chg of Status *of Committee Member*

**To:** Dean of The Graduate School

**From:** Program Director: \_\_\_\_\_  
Director's name/Program name

***Student Information:***

Name: Ryan Schoell ID Number: 200200288

Degree/Program: Ph.D/NE Signature: \_\_\_\_\_

***Member to Be Replaced, Substituted for, Deleted, or have Status Changed:***

Dr. Mohamed Bourham/NE/committee member

\_\_\_\_\_  
Name/Program/Role (please type or print) Signature /Date (or attach letter/email)

If Substitution, duration: ☒ oral final; ☐ other

Reason (if 'other', specify duration; if 'Status Change', specify how):

We are replacing Dr. Bourham with someone who has experience with simulations

***Replacement, Substitution, or Additional Member:***

Dr. Benjamin Beeler

Name/ (please type or print)

Grad Faculty

Graduate Faculty Status (grad faculty or affiliate grad faculty)

Program/Institution/Proposed Role NE/NCSU/committee member

\_\_\_\_\_  
Signature (or attach letter/email) Date

***DGP Signature/Date:*** \_\_\_\_\_

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***Approved for the Graduate School by:*** \_\_\_\_\_  
Signature/Date