MAJOR PROFESSOR SELECTION FORM  
DEPARTMENT OF CHEMICAL and BIOMEDICAL ENGINEERING  
FAMU-FSU COLLEGE OF ENGINEERING  

Directions:  

1. Fill out completely.  
2. Select three different advisors.  
3. Have the prospective faculty member sign the form, thereby agreeing to serve as your advisor, if the assignment is approved.  
4. Indicate your ranking of preference.

Student Name:________________________________________________________________

Choice number:

Major professor(s) ________________________________
Professor signature ________________________________
Project level: MS Thesis _____ Ph.D. Dissertation ____

Choice number:

Major professor(s) ________________________________
Professor signature ________________________________
Project level: MS Thesis _____ Ph.D. Dissertation ____

Choice number:

Major professor(s) ________________________________
Professor signature ________________________________
Project level: MS Thesis _____ Ph.D. Dissertation ____

For department use only

Graduate Committee Action:_________________________ Date:______________

Approved:_________________________________________ Date:______________

Departmental Chair