

**MSIE Thesis Supervisory Committee Membership  
 Invitation Request Form**  
 Department of Industrial Engineering  
 FAMU-FSU College of Engineering

**Student Information:** (please print or type)

LAST NAME	FIRST NAME	MIDDLE INITIAL	STUDENT NUMBER	TELEPHONE	E-MAIL
TENTATIVE THESIS TITLE				MAJOR PROFESSOR	

**Comments of the Major Professor on Thesis Work:**

**Faculty Being Invited to Thesis Supervisory Committee:**

NAME	(CHECK ONE:)	ACCEPT	DECLINE
SIGNATURE		<input type="checkbox"/>	<input type="checkbox"/>
	DATE		

**Approval of Department Chair:**

SIGNATURE	DATE
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