

**MAJOR PROFESSOR RECOMMENDATION**

**GRADUATE ADVISORY COMMITTEE**

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**GRADUATE STUDENT:** \_\_\_\_\_

CWID: \_\_\_\_\_

Degree/Program : \_\_\_\_\_

**MAJOR PROFESSOR:** \_\_\_\_\_

Office/Phone: \_\_\_\_\_

**FORMER MAJOR PROFESSOR (IF APPLICABLE):** \_\_\_\_\_

**GRADUATE ADVISORY COMMITTEE** (Complete this portion once committee is formed)

\_\_\_\_\_  
Committee Member *Type name*

\_\_\_\_\_  
Committee Member *Signature*

\_\_\_\_\_  
Committee Member *Type name*

\_\_\_\_\_  
Committee Member *Signature*

\_\_\_\_\_  
Committee Member *Type name*

\_\_\_\_\_  
Committee Member *Signature*

\_\_\_\_\_  
Committee Member *Type name*

\_\_\_\_\_  
Committee Member *Signature*

**Recommended by:**

\_\_\_\_\_  
School Director/Program Coordinator

\_\_\_\_\_  
Date

**Approved by:**

\_\_\_\_\_  
Dean of Graduate School

\_\_\_\_\_  
Date

**Distribution:**

Student  
Major Professor  
Graduate Coordinator