

FACULTY ADVISOR ASSIGNMENT FORM

Student Name (print/type): _____

Student UNM ID # _____

Students UNM email (must use on every email) _____

Student will receive Research Assistant funding: check one Yes _____ No _____

If so, what is the effective date (sem/yr): _____

Study Plan: check one Plan I ___ Plan III ___ Plan III ___ Space Systems ___
or PhD _____

Graduate Faculty Advisor:

Name (print/type): _____

UNM Email: _____ Effective date (sem/yr): _____

Academic Advisor:

Name (print/type): _____

UNM Email: _____

Student Signature

Date

APPROVAL:

Faculty Advisor Signature

Date