## BATTEN SCHOOL OF COASTAL & MARINE SCIENCES & VIMS ADVISOR SELECTION – M.S. OR PH.D. PROGRAMS



## **Student Information:**

| FIRST NAME                         | LAST NAME                       |                                 | BANNER ID (93#)           | DEGREE PROGRAM |  |
|------------------------------------|---------------------------------|---------------------------------|---------------------------|----------------|--|
|                                    |                                 |                                 |                           |                |  |
| TERM & YEAR OF ENTRY               |                                 | EMAIL ADDRESS                   | EMAIL ADDRESS             |                |  |
|                                    |                                 |                                 |                           |                |  |
| STUDENT SIGNATURE                  |                                 | DATE                            | DATE                      |                |  |
|                                    |                                 |                                 |                           |                |  |
|                                    | Samn                            | lo Foi                          | cm                        |                |  |
| I have agreed to serve as the Majo | or Advisor (or Co Major Advisor | or) and to direct the degree of | arogram for the above r   | named student  |  |
| Major Advisor Name                 | SIGNATURE                       | or) and to direct the degree p  | Diografii for the above-i | iameu student. |  |
| IVIAJOR ADVISOR NAIVIE             | SIGNATURE                       |                                 | DATE                      |                |  |
|                                    |                                 |                                 | _                         |                |  |
| Co-Advisor Name (if applicable)    | SIGNATURE                       |                                 | DATE                      |                |  |
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| Studer                             | nt Sho                          |                                 | omr                       | nete           |  |
| Otaaoi                             | 16 0110                         | ara c                           |                           | 71010          |  |
| Associate Dean for Academic Af     | fairs Action:                   |                                 | 0'                        |                |  |
| NAME                               | SIGNATURE                       |                                 | SIGN.                     |                |  |
| 1 0                                |                                 | DOGG                            | 911                       | l              |  |
| COMMENTS AND/OR REASON, IF DENIED: |                                 |                                 |                           |                |  |
|                                    |                                 |                                 |                           |                |  |
|                                    |                                 |                                 |                           |                |  |
|                                    |                                 |                                 |                           |                |  |