

## MAJOR PROFESSOR / CO-ADVISOR

By signing this form, I agree to serve as major professor for the student listed below. Any change to this arrangement requires that a new form be submitted with signatures from old and new major professor(s). Please type full names and sign below.

Major Professor (new):  \_\_\_\_\_ Date:

Co-Advisor (new):  \_\_\_\_\_ Date:

Major Professor (former):  \_\_\_\_\_ Date:

Co-Advisor (former):  \_\_\_\_\_ Date:

Student:  \_\_\_\_\_ Date:

Graduate Coordinator:  \_\_\_\_\_ Date:

**(Please return signed original copy to the Graduate Program Assistant for Student's File)**