

Date _____

Associate Chair, Graduate Affairs
School of Electrical and Computer Engineering
Georgia Institute of Technology
Atlanta, GA 30332-0250

Dear Associate Chair:

This is to inform you that I have agreed to serve as the MS Thesis Advisor* for

_____ (_____)
(Print student's name) **(GT ID Number)**

The student's research will be in the area of:

- Bioengineering
- Computer Systems & Software
- Digital Signal Processing
- Electromagnetics
- Electronic Design & Appls
- Microelectronics
- Optics
- Electrical Energy
- Systems & Controls
- Telecommunications
- VLSI Systems & Digital Design
- Other _____

The specific area of the student's research is expected to be:

_____.

Please update the student's records with this information.

Sincerely,

M.S. Advisor

M.S. Co-Advisor*

(Print Advisor's name)

(Print Co-Advisor's name)

*It is ECE's policy that students who select an advisor outside of the School (e.g. GTRI, College of Computing) must also have an advisor within the School.