

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 / PhD** (circle one or both if a PhD student doing MS thesis on the way) Advisor* for

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

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

- | | | |
|---|--|--|
| <input type="checkbox"/> Bioengineering | <input type="checkbox"/> Computer Systems & Software | <input type="checkbox"/> Digital Signal Processing |
| <input type="checkbox"/> Electromagnetics | <input type="checkbox"/> Electronic Design & App | <input type="checkbox"/> Nanotechnology |
| <input type="checkbox"/> Optics & Photonics | <input type="checkbox"/> Electrical Energy | <input type="checkbox"/> Systems & Controls |
| <input type="checkbox"/> Telecommunications | <input type="checkbox"/> VLSI Systems & Digital Design | |
| <input type="checkbox"/> Other _____ | | |

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

_____.

Please update the student's records with this information.

Sincerely,

Advisor

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 of ECE must have a co-advisor within the School of ECE.