University at Buffalo
Department of Engineering Education
School of Engineering and Applied Sciences

Advisor Selection Form

Please use this form to declare your intended major professor. Please obtain the faculty member's signature on this form and return to the graduate academic coordinator. Do not use this form if you are changing your advisor.

Your name: _____

Signature: _____ Date: _____

Advisor Selection

DEE Faculty Member Name: _____

Signature: _____ Date: _____

Updated: Fall 2024