



**Department of Computer Science & Electrical Engineering  
Request for Declaration of Research Advisor/Co- Advisor**

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

To: Graduate Program Director

Program: CMSC, CMPE, ENEE (please circle)

Degree: MS, Ph.D. (please circle)

From: \_\_\_\_\_ UMBC Email: \_\_\_\_\_  
(Last Name, First Name)

This is to request that Dr. \_\_\_\_\_ become my research  
advisor. (First Name, Last Name)

I would like to request Dr. \_\_\_\_\_ become my co-advisor.  
(First Name, Last Name)

Dr. \_\_\_\_\_ was my temporary or previous  
advisor. (First Name, Last Name)

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Student's signature \_\_\_\_\_ Date \_\_\_\_\_

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Current Temporary Advisor's signature \_\_\_\_\_ Date \_\_\_\_\_

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Requested Research Advisor's signature \_\_\_\_\_ Date \_\_\_\_\_

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Requested Co-Advisor's signature \_\_\_\_\_ Date \_\_\_\_\_

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Graduate Program Director's signature \_\_\_\_\_ Date \_\_\_\_\_

