

SCHOOL OF INDUSTRIAL ENGINEERING AND MANAGEMENT MS Advisor and Track Selection Form
--

Last Name _____ **First Name** _____

CWID _____

MS Program Option: Thesis
 Non-thesis

MS Program Track: General Industrial Engineering (All eligible IEM Faculty)
 Engineering Management (TC, KJ, JM)
 Operations Research (BB, JB, AB, SH, MK, CL, TL, BY, FY)
 Supply Chain & Logistics (BB, JB, AB, SH, MK, CL, TL, BY, FY)

MS Advisor (must be listed in the track chosen above)
--

Advisor/Committee Chair: Last Name _____ **First Name** _____

By signing below, both the student and the faculty member confirm that they have had a discussion regarding the student’s career and research interests and reviewed a preliminary plan of study prepared by the student. Furthermore, the faculty member agrees to serve as the student’s advisor for the duration of the student’s MS program. Any change in the permanent advisor will require the approval of both the current and the new advisors.

Signatures:

Advisor **Date**

Student **Date**