MAJOR PROFESSOR AGREEMENT

*Must be submitted by the end of the first full year of study

LSUID:		Date	
Student Name			
Last	First	MI	
I agree to serve as Major Professor for the M	1S or PhD deg	gree program of this student.	
Major Professor (Chair of Advisory Committee)	Date	Co-Chair of Advisory Committee	Date
I (we) agree to serve as the Advisory Comm	ittee for the s	student named above.	
Faculty Member		Date	
(Below is for a	changing m	ajor professors only)	
I agree that Prof	serves as th	e new Major Professor for	
(name of major professor)		(name of	student)
Also, I (<u>agree or disagree</u>) that the research (circle one)	results obtail	ned under my supervision can be use	ed toward
his/her (<u>Ph.D. of M.S.</u>) degree, including the (circle one)	general/final	l exams and the dissertation/thesis.	
		Major Professor Signature	Date
(in case of "disagree" from the major profes. I declare that I will not use any of research ((Ph.D. of M.S.) degree, including the genera (circle one)	results obtain	· · · · · · · · · · · · · · · · · · ·	toward my
		Student Signature	Date