Northeastern University Department of Electrical and Computer Engineering Ph.D. Research Advisor Form

Date form completed:		
First Name:	Last Name:	NUID:
Husky email:		
Program: ☐ PhDEE ☐ PhDC:	E Status: Full-time	☐ Part-time
First semester enrolled in the Ph.D. p	program at NU:	
Concentration:		
If this is a change of advisor, name of	of previous advisor:	
Student's name :	Signature	
Research Advisor's name:	Signature	
Research Advisor's name:	Signature	