

**DEPARTMENT OF TEXTILES, APPAREL DESIGN  
AND MERCHANDISING**

**Selection of Major Professor**

Student Name: \_\_\_\_\_ ID #: 89-\_\_\_\_\_

Concentration: \_\_\_\_\_

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

Select one:

Ph.D.                      M.S.

Signatures:

\_\_\_\_\_  
Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Major Professor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Graduate Advisor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Head

\_\_\_\_\_  
Date

Copies:

    Main office (Original)

    Student

    Major Professor