



PERMISSION TO ENROLL IN MAE 797-ADVANCED DIRECTED RESEARCH (4)

I, _____ verify that I am supervising
Faculty Name (please print name)

the below-named student in course MAE 797. Please give him/her permission to
enroll in _____ units of MAE 797 for the _____ Semester.

Student Name: _____

Student I.D. #: _____

Address: _____

Home Phone: _____

Work Phone: _____

Fax: _____

E-Mail: _____

Previously enrolled in MAE 797? _____ Yes _____ No

of units previously enrolled in MAE 797: _____

MAE 797 IS REPEATABLE TO A MAXIMUM OF 8 UNITS.

Student Signature _____ Date _____

Faculty Supervisor Signature _____ Date _____

Graduate Advisor _____ Date _____

Department Chair _____ Date _____

Contact the MAE Administrative Support Coordinator in ECS-635 to submit this form, obtain a course code number, and a permit to register.