



GRADUATE ADVISOR ASSIGNMENT

NAME : _____

ADDRESS (Greeley, if available): _____

Student Number or UNC Number: _____

Student's Degree Level:	M.A.	M.A.T.	M.P.H.	M.S.
	Ed.S.	D.A.	ED.D.	Ph.D.
	Psy.D.	Non-Degree Licensure		

Student's Major: _____

TO BE COMPLETED BY THE DEPARTMENT CHAIRPERSON, DEAN, OR GRADUATE COORDINATOR:	
Advisor Assigned _____	UNC # _____
Signed _____	Date _____
Chair, Dean, or Graduate Coordinator	

Distribution: Graduate School Office
Student

Advisor
Chair or Graduate Coordinator