

## Appendix B

### Mechanical Engineering Graduate Student Profile

Today's Date: \_\_\_\_\_ Date Degree Expected: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Student ID Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Gender: (check one) Male \_\_\_\_\_ Female \_\_\_\_\_ Citizenship: \_\_\_\_\_

Current Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Name of Emergency Contact (within the United States): \_\_\_\_\_

Emergency Contact Phone Number: \_\_\_\_\_ Relationship: \_\_\_\_\_

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Program: (check one)

M.S. Option A (thesis) \_\_\_\_\_ M.S. Option B (course) \_\_\_\_\_

Ph.D. without M.S. \_\_\_\_\_ Ph.D. with M.S. \_\_\_\_\_

\*\*Ph.D. students only: Date you expect to take the Qualifying Exam: \_\_\_\_\_

Faculty Advisor: \_\_\_\_\_

Assistantship: (check one, if applicable) RA \_\_\_\_\_ TA \_\_\_\_\_ GA \_\_\_\_\_ FS \_\_\_\_\_

Office/Lab Location: \_\_\_\_\_ Desk Number: \_\_\_\_\_ Office/Lab Phone: \_\_\_\_\_

Technical Area: (check one)

Mechanics \_\_\_\_\_ Thermal-Fluids \_\_\_\_\_ Systems & Design \_\_\_\_\_ Manufacturing \_\_\_\_\_ Paducah \_\_\_\_\_

Thesis Topic: (if applicable) \_\_\_\_\_

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