

Graduate Student Information Form 104

Name: _____
(Last/Family) (First) (M.I.)

Preferred Name/Gender Pronouns (if applicable) _____

Gender Male Female Other: _____ Prefer not to say

Student Number 89- _____ LSUEmail: _____

Citizenship: U.S. Other _____

Baton Rouge Address: _____

City, State, Zip: _____ Phone Number: _____

Campus Office Room Number & Building: _____

Please check one of the following:

Black, Non-Hispanic
Native American / Alaskan Native
Other: _____

White, Non-Hispanic
Asian or Pacific Islander
I prefer not to say

Hispanic
Indian

Starting/Entry Semester _____ Student Status: Full Time Part Time

Degree Program: Master's in Civil Engineering (Thesis) Master's in Civil Engineering (Non-Thesis)
Master's in Coastal & Ecological Engineering Ph.D. in Civil Engineering

Area of Specialization:

Environmental
Structural
Mechanics of Materials

Water Resources
Geotechnical

Coastal & Ecological
Transportation

Name of Faculty Advisor: _____

If you are a graduate assistant check one of the following:

Research Assistant Teaching Assistant
Other (i.e. EDA Fellowship, Scholarship, etc.) _____

Name and address (preferably local) person to be notified in case of an emergency:

Name: _____ Phone: _____

Location of Contact: _____ Relation to the person listed above: _____