Graduate Student Information Form G104

Name:	(First)			
(Last/Family)	(First)		(M.I.)	
Preferred Name/Gender Pronouns (if applicable):				
Gender: Male Female Other:	Prefer not to s	Prefer not to say		
Student Number: 89	LSU Email:			
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	White, Non-Hispanic Asian or Pacific Island		Hispanic Indian	
Native American / Alaskan Native Other:	l prefer not to say		malan	
Starting/Entry Semester:	Student Status:	Full Time	Part Time	
Degree Program: Master's in Civil Engineering (Master's in Coastal & Ecologie		Master's Civil Ph.D. in Civil	l Engineering (Non-Thesis Engineering	
Area of Specialization:				
Environmental Water Resou Structural Geotechnica		Coastal & Ecologica Transportation		
Mechanics of Materials				
Name of Faculty Advisor:				
If you are a graduate assistant check one of the follow Research Assistant Teaching Assistant Other (i.e. EDA, Fellowship, Scholarship, etc.)	t			
Name and address of (preferably local) person to be				
Name:				
Location of Contact:	Relation to the person listed above:			
I authorize that all information provided on this shared with the College of Engineering for stude be securely retained indefinitely. To learn more	ent planning and informat	tion reporting	g purposes. This data will	



Department of Civil & Environmental Engineering Revised 08/2020 by ML