

## Master of Human Kinetics Faculty Thesis Advisor Form

Student Name: \_\_\_\_\_

Student Address: \_\_\_\_\_

Student Phone Number: \_\_\_\_\_

I \_\_\_\_\_, have communicated with the student named above and I am willing to serve as the **Faculty Thesis Advisor** for the student if they are successful in their application to the Master of Human Kinetics program.

Faculty Members Name: \_\_\_\_\_

Faculty Members Signature: \_\_\_\_\_

Date: \_\_\_\_\_

This form was completed:

\_\_\_\_\_ in person

\_\_\_\_\_ via email