NATIONAL CHENG KUNG UNIVERSITY DEPARTMENT OF LIFE SCIENCES

**ADVISOR CONFIRMATION FORM FOR GRADUATE STUDENTS**

|  |  |  |  |
| --- | --- | --- | --- |
| **Division** |  | **Name** |  |
| **Graduated School &****Department** |  | **Date of Graduated** | **20\_\_/\_\_\_** |
|  |
| **Enrollment****Date** | **20\_\_\_/\_\_\_\_ (YYYY/MM)** | **Student ID No.** |  |
| **Mobile phone** |  | **E-mail box** |  |
| **Declaration****of****Student** | I hereby invite Professor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to be my thesis advisor. If I need to change the advisor, I will submit an application to the department under my original advisor and new advisor’s approval; and the application shall be authorized by department.Student’s Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_/\_\_\_\_/\_\_\_\_ (YYYY/MM/DD) |
| **Declaration****of****Advisor** | I hereby agree to be \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ‘s advisor and guide his/her courses and thesis research during guidance period.Advisor’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_/\_\_\_\_\_/\_\_\_\_(YYYY/MM/DD) |
| **Notification** | **1. Please submit this form to department office before the end of the first semester.****2. According to regulation of advisor alteration, students must submit an application form to the department office if there is any change of advisor.** |