

APPROVAL

GRADUATE ADVISOR NOMINATION AND ACCEPTANCE FORM

Document No.: FM-GRS-10-00

Effective Date: July 13, 2015

Name of Student	:			
	LAST NAME	FIRST NAME	M.I.	
Student no.	:			
Program	:			
: Contact Info				
NOMINATION STAT	EMENT			
I respectfully nominate		duate Advisor.		
	as my Grad	duate Advisor.		
		(Student's S	ignature & Date)	
ACCEPTANCE STATEMENT				
I am willing to serve as the graduate advisor of (Name of Student)				
and am aware of the following duties and responsibilities:				
and am aware or the	e ronowing daties and respo	mainines.		
a. Guide the advisee in the preparation of a thesis/project/research/dissertation proposal and likewise in				
the final manuscript preparation				
b. Assist the advisee during the oral presentation				
c. Assist the advisee in case of revision/s of the manuscript				
d. Advise and guide the advisee during the data gathering period and check the results				
e. Ensure that the written manuscript and article adheres to the institutional formatf. Ensure that all thesis/project/research/dissertation requirements are submitted to the School of				
Graduate Studies on time				
		(Graduate Advisor's Sig	inature & Datal	
		(Graduate Advisor 5 Sig	nature & Date)	

Dr. Jonathan W. L. Salvacion Dean, School of Graduate Studies

Accomplish in 3 copies: 1 copy for the School of Graduate Studies

1 copy for the Advisor

1 copy for the Registrar's Office