

Form 5

Graduate Institute of Science Education
National Taiwan Normal University
Agreement Form of Dissertation Advisor

(Deadline: Confirmation of dissertation advisor should be made prior to or as soon as the student passed the candidacy examination.)

Application Date : _____ year _____ month _____ day

Student Name : _____ Student ID Number : _____

Enrollment Year : Academic year _____

I, _____, would like to seek approval from Dr. _____
_____ to be my dissertation advisor.

* Please sign below if you agree to be the student's dissertation advisor. *

Signature of the GISE Director : _____