**Thesis/Dissertation Advisor Consent Form**

I \_\_\_\_\_\_\_\_ (Student name), enrolled in Department of Business Administration
 □ Master’s □ PhD program/ Academic Year\_\_\_\_\_\_\_, request Professor (name) to be the advisor of my thesis/dissertation. With my signature, I acknowledge that I read, understand and will abide by the [NTUST Guidelines for Thesis Advisors and Graduate Students](https://www.academic.ntust.edu.tw/ezfiles/1/1001/img/1304/NTUSTGuidelinesfortheInteractionbetweenThesisAdvisorsandGraduateStudents.pdf).

**Student’s signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student ID-number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Advisor name )
herewith agree to supervise the thesis/ dissertation of
and to take all responsibilities as outlined in the [NTUST Guidelines for Thesis Advisors and Graduate Students](https://www.academic.ntust.edu.tw/ezfiles/1/1001/img/1304/NTUSTGuidelinesfortheInteractionbetweenThesisAdvisorsandGraduateStudents.pdf).

**Advisor:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (signature)
**Co-Advisor (if applicable)** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (signature)

**Chair of Department**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (signature/seal)

**Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_