

## **DISSERTATION ADVISOR & PROGRAM DECLARATION**

I. Student Section Completed by st	tudent, then submitted to Dissertation Advisor	
Student Name	Student ID#	
The above-named student has cho granting program noted below.	osen the following faculty member as his/her disso	ertation advisor in the degree-
Advisor Name	Degree-Granting Program	
Student Signature		Date
*******	**********	******
II. Dissertation Advisor Section Co.	ompleted by Dissertation Advisor then submitted t	o chair(s) and program director.
•	into my laboratory and thus assume responsibilitiemic advisement, research guidance, and financial ment and college.	
Advisor Signature		Date
Advisor Name	Advisor ID#	
*******	*********	******
III. Degree-Granting Program Sect	ion Signed by the program director & chair of the	degree-granting program.
I acknowledge the above-named fa	aculty member's acceptance of the above-named	doctoral student.
Degree-Granting Program Director	r Signature	Date
Degree-Granting Department Chai	ir Signature	Date
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IV. Primary Department Chair Section Signed by the chair of the dissertation advisor's <u>primary department</u> .			
I, as chair of the faculty member's primary appointment department, acknowledge that in the absence of sufficient funding the department will be financially responsible for the support of the above-named student.			
Chair of the Advisor's Primary Department Signature Date			
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MD/PhD Program Section MD/PhD Students Only			
I, as program director for the combined degree program, acknowledge the above-named faculty member's acceptance of the above-named doctoral student.			
MD/PhD Program Signature Date			
Submit completed form with all required signatures to: College of Graduate Studies, 3122 Weiskotten Hall			
cc: Registrar, First-Year Advisor, Program Director, Department Chair(s), Student, MD/PhD Program (MD/PhD students only)			