

國立清華大學華德福教育碩士在職學位學程

擬聘指導教授申請單

注意事項：

- 1、碩士生於入學後第四學期結束前，請填具「擬聘指導教授申請單」，經論文指導教授(以下簡稱指導教授)同意簽名後，送至院辦公室確認。
- 2、指導教授以本校專任師資優先考量，如選擇外籍教師擔任指導教授，須同時選擇一位本校專任教師共同指導。
- 3、若更換指導教授，請填具「更換指導教授申請單」並敘明理由，再經原指導教授及新聘指導教授簽名後，送至院辦公室由院長核定，並以一次為限。
- 4、本表一式四聯皆需印出請第一、共同指導教授簽章。

(第一聯 學院辦公室存查聯)

所別	華德福教育碩士在職學位學程		
學號		學生姓名 (親自簽名)	
身份證號		出生年月日	年 月 日
行動電話		聯絡電話	
聯絡地址			
指導教授簽名			
	(第一指導教授) 簽核日期： 年 月 日 上述簽核日期為院辦公室收件依據	(共同指導教授)	簽核日期： 年 月 日
主任簽章：_____			年 月 日
院長簽章：_____			年 月 日

(第二聯 第一指導教授收執聯)

國立清華大學華德福教育碩士在職學位學程
研究生指導教授同意書

_____ 學年度

本人同意指導研究生_____ (學號：_____)

學生(簽名)：_____

教授(簽名)：_____

簽核日期：_____ 年 _____ 月 _____ 日

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- 4、本表一式四聯皆需印出請第一、共同指導教授簽章。

(第三聯 共同指導教授收執聯)

國立清華大學華德福教育碩士在職學位學程
研究生指導教授同意書

_____ 學年度

本人同意指導研究生_____ (學號：_____)

學生(簽名)：_____

教授(簽名)：_____

簽核日期：_____ 年 _____ 月 _____ 日

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(第四聯 研究生收執聯)

國立清華大學華德福教育碩士在職學位學程
研究生指導教授同意書

_____ 學年度

本人同意指導研究生_____ (學號：_____)

學生(簽名)：_____

教授(簽名)：_____

簽核日期：_____ 年 _____ 月 _____ 日

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National Tsing Hua University Master's Program in Waldorf Education

Consent Form for Thesis Instruction

Once student confirmed Advisor/Co-Advisor, please sign and have the Advisor/Co-Advisor sign below. The form should be submitted to the program office to complete the confirmation process. Please direct all questions and concerns to the Waldorf program office.

(First Copy: For Program Office Record Keeping)

Program	Master's Program in Waldorf Education		
NTHU ID Number		Student Name (signature)	
ID		Date of Birth	
Cellphone		Phone	
Address			
Advisor Signature	(Advisor) Date: _____	(Co-Advisor) Date: _____	
Program Chair: _____ Date: year/ month/ day/			
Dean of College of Education: _____ Date: year/ month/ day/			

(Second Copy: For Advisor's Keeping)

Consent Form for Thesis Instruction

I hereby agree to act as the thesis advisor of the following graduate student from the Master's Program in Waldorf Education:

Student Name :

NTHU ID Number :

Student Signature : _____

Advisor Signature : _____

Date: Year/ Month/ Day/

Notes:

1. Master's students are required to fill out this application form and have it signed by their thesis advisor (hereafter referred to as "advisor") before the end of their fourth semester. The form should then be submitted to the program office for confirmation.
2. Priority will be given to full-time faculty members at our university when selecting thesis advisors. If an external faculty member is selected as an advisor, a full-time faculty member from our university must also be selected to co- advisor.
3. If changing thesis advisors is necessary, please fill out the "Application Form for Changing Thesis Advisor" and explain the reasons. The form must be signed by the original and new advisors before being submitted to the department office for approval. Only one change is allowed.
4. Four copies of this form are required, all of which must be signed by the primary and co-advisors.

(Third Copy: For Co-Advisor's Keeping)

Consent Form for Thesis Instruction

I hereby agree to act as the thesis co-advisor of the following graduate student from the Master's Program in Waldorf Education:

Student Name :

NTHU ID Number :

Student Signature : _____

Advisor Signature : _____

Date: Year/ Month/ Day/

Notes:

1. Master's students are required to fill out this application form and have it signed by their thesis advisor (hereafter referred to as "advisor") before the end of their fourth semester. The form should then be submitted to the program office for confirmation.
2. Priority will be given to full-time faculty members at our university when selecting thesis advisors. If an external faculty member is selected as an advisor, a full-time faculty member from our university must also be selected to co- advisor.
3. If changing thesis advisors is necessary, please fill out the "Application Form for Changing Thesis Advisor" and explain the reasons. The form must be signed by the original and new advisors before being submitted to the department office for approval. Only one change is allowed.
4. Four copies of this form are required, all of which must be signed by the primary and co-advisors.

(Fourth Copy: For Student's Keeping)

Consent Form for Thesis Instruction

I hereby agree to act as the thesis co-advisor of the following graduate student from the Master's Program in Waldorf Education:

Student Name :

NTHU ID Number :

Student Signature : _____

Advisor Signature : _____

Date: Year/ Month/ Day/

Notes:

- 1.Master's students are required to fill out this application form and have it signed by their thesis advisor (hereafter referred to as "advisor") before the end of their fourth semester. The form should then be submitted to the program office for confirmation.
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