**Research Advisor Form**

PENN ID # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 First Middle Last

Research Advisor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 First Last

**To be completed by the Master’s student**

Initial here

\_\_\_\_\_\_ I understand the course and research requirements of the Master’s program.
RESEARCH – four course units of BIOL5999. The total amount of research effort necessary to complete a master’s thesis varies among students and among projects but is expect to require at least four semesters of part time research and at least one summer of full time research effort.
COURSEWORK – four 5000+ level courses.

\_\_\_\_\_\_ I have discussed research expectations and courses with the research advisor listed above.

\_\_\_\_\_\_ I understand that research in future semesters, and thus completion of the research requirements for the Master’s degree, is contingent upon my satisfactory research progress as determined by my research advisor.

**Student signature** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**To be completed by the Research Advisor**

Initial here

\_\_\_\_\_\_ I agree to advise the above student’s scientific research (three semesters of BIOL5999 and any additional independent study) as long as the student remains in good standing.

\_\_\_\_\_\_ I agree to submit evaluations after each semester of research conducted by the student.

\_\_\_\_\_\_ I have discussed research expectations and courses with the student listed above.

\_\_\_\_\_\_ I agree to supervise Master’s thesis of the above student.

\_\_\_\_\_\_ I agree to review the thesis of ONE Master’s student supervised by a different advisor.

**Advisor Signature** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Program Director Signature** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_