

國立臺北護理健康大學運動保健系碩士論文指導教授同意書
Department of Exercise and Health Science, NTUNHS
Master's Thesis Advisor Consent Form

第_____屆

Enrollment Year: _____

日間部碩士班 Master's Program (Day Program)

碩士在職專班 In-Service Master's Program

國際運動科學與智慧健康碩士學程 MSc Program in International Sport Science and Intelligent Health

研究生姓名 Student Name : _____

學號 Student ID : _____

學生簽名 Student Signature : _____

日期 Date : _____

指導教授簽名 Advisor Signature : _____

日期 Date : _____

共同指導教授簽名 Co-Advisor Signature : _____

日期 Date : _____

系主任簽名 Dept Chair Signature : _____ 日期 Date : _____

1. 指導教授需以本系所專任老師為主要指導者，若有需求經指導教授同意後，可敦聘聯合指導教授共同指導。The thesis advisor must be a full-time faculty member of this department. If necessary, with the consent of the primary advisor, a co-advisor may be appointed to jointly supervise the thesis.

2. 研究生若須更換指導教授者，依本校「論文指導教授選定及變更要點」辦理。If a graduate student needs to change the thesis advisor, the change shall be handled in accordance with the university's "Guidelines for the Selection and Change of Thesis Advisors.

正本需繳回系辦公室並請自行影印留存

The original copy must be submitted to the department office. Please make and keep a copy for your own records.