CSSP-OGP Form 17 (Rev. 2023-09-18)



OFFICE OF THE GRADUATE PROGRAM

College of Social Sciences and Philosophy University of the Philippines Diliman

REQUEST FOR APPOINTMENT OF THESIS/DISSERTATION ADVISER

Date:		
FOR:	The Dean College of Social Sciences and Philosophy	
	tfully request that an adviser be appointed to supe	ervise my master's thesis / doctoral dissertation project
in partia	al fulfillment of the degree	
Signatur	re over Printed Name of the Student	
Conforme	è:	
Signature over Printed Name of Adviser/Co-Adviser		Signature over Printed Name of Co-Adviser (if any)
For retiri	ing Adviser or Adviser on extended service (Appointment i	will be given upon retirement of original Adviser):
Name o	of Adviser Designate:	
 Departm	as Adviser/ ent/Institute Graduate Program Coordinator	Co-Advisers. Department Chair / Institute Director Date:
	ecommending approval ot recommending approval	
	Remarks:	
	utor, Office of the Graduate Program	
Action 7	Taken: [] Approved [] Disapproved	
	Remarks:	
Dean Date:		