

**THIS FORM IS FOR PREVIEW PURPOSES ONLY AND WILL NOT BE ACCEPTED FOR SUBMISSION.**

**PLEASE INITIATE FORM IN DOCUSIGN.**

#### FORM GSBS81: THESIS ADVISOR & DEPARTMENTAL FINANCIAL AGREEMENT

##### Instructions: Please read in full before signing

The Thesis Advisor must hold a faculty appointment within the Morningside Graduate School of Biomedical Sciences at UMass Medical School. The choice must be approved by the Thesis Advisor's Chair and by the Dean.

Acceptance of a student by a Thesis Advisor requires a commitment to support the student's research training through successful completion of a doctoral dissertation, and a commitment to provide financial support for conducting the research project and support of the student, including stipend, fees, and health insurance.

In cases where co-advisors from different Departments will mentor the student, the student should determine if one or both co-advisors will assume financial responsibility for supporting the student. If financial responsibility will be shared, the names of both Department Chairs and both Department Administrators must be entered. If only one co-advisor will assume financial responsibility, only the names of the funding Department Chair and Department Administrator need to be entered.

If the Thesis Advisor becomes unable to support the student financially, the Thesis Advisor's department (organizational unit receiving and administering the advisor's research funds) or Program assumes responsibility for financial support of the student.

##### Information for Department Administrators

Funding will change from the Graduate School to your Department effective September 1st (unless otherwise stated). The Graduate School will contact you via email regarding the transfer. Your department is responsible for processing the PA for the funding change.

**Student Information**

**Student Name:**

**Student PSCS ID:**

**Are you a student in the Population Health Sciences Program?**  Yes  No

**Funding Information and Signatures**

**Effective Date:** September 1, 20

**UMass Chan Funding Department:**

**UMass Chan Co-Funding Department:**

Role	Name	Signature	Date
Student			
Thesis Advisor			
Co-thesis Advisor			
Funding Department Chair			
Co-Funding Department Chair			
Funding Department Administrator			
Co-Funding Department Administrator			

**Administrative Approval Signatures**

Role	Name	Signature	Date
GSBS Office Staff			
GSBS Dean			

Distribution: All signers