

Kainan University

School of Tourism and Transportation

Thesis Advisor Application

Master's program Master's in-service programs (_____ group)
(Student ID No. : _____) choose _____ as my research area
and intend to apply _____ to serve as my thesis advisor.

To the School of Tourism and Transportation

Student: _____ (Signature)

Contact Number: _____

Date: _____

School of Tourism and Transportation, Kainan University Master's and Master's in service Program Affairs Committee Review	
Result	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved
Meeting Date	Year _____ Month _____ Day _____ Meeting Number _____ Academic Year _____

(Filled out by the School Secretary)