

Colegio de San Juan de Letran Letran Research Center

Form SR02

ADVISER SELECTION FORM

	Date Submitted:							
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	Last Name First Name			M	1			
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Thesis Titl	е							
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	Short description in less than 150 words							
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To Be filled	Potential Advisers							
by the Research	Adviser 1:	☐ Yes	□ Not a	at thi	is tim	ne		
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Professor		□ Yes —						
	Adviser 3:	☐ Yes	☐ Not a	at thi	is tin	ne		
	Program Chairperson's final recommendation							