

Director of Finance and Administration signature

Office of Research Education Fitzsimons Building, Room 1327 13001 E. 17th Place Mailstop C290 Phone: 303-724-8728 SOM-ORE@cuanschutz.edu

Student/Trainee: Trainee's program: Student's SID: Student's EID:	
Mentor: Mentor's Primary Appointing Department: Mentor's Division (if applicable): Mentor's Division Head (if applicable):	
Mentor's Current Funding:	
Mentor's statement	
I have accepted into my laboratory the student named all indicated above, in order to work on her or his dissertation of my knowledge, I have adequate funds to support this provide financial support this student to the best of my all contingent on the student continuing to make satisfactory	on. By signing this statement, I attest that, to the best student for at least two years. I further pledge to bility during the remainder of the training period,
Mentor's signature	
Division/Department leadership's acknowledgment	
I acknowledge the mentoring relationship described above student lies with the faculty mentor; however, should the the department will assume financial responsibility until the student or until the student completes the Ph.D. degree. Student in transferring to the laboratory of a faculty mem degree is completed. I agree to manage the student's still a timely manner so that the student does not incur any laboratory and the student does not incur any laboratory.	faculty member lose the ability to support this student the faculty member is able to resume supporting the Alternatively, if necessary, I agree to assist the ber who has the resources to provide support until the ipend appointment and to process tuition remission in
Department Chair's signature	Division Head's signature (if applicable)