

UNIVERSITY of MISSOURI

OFFICE OF GRADUATE STUDIES



Adviser Consent Form

I _____ am the dissertation advisor of _____ and can confirm that (she or he) has completed or will complete the requirements for degree candidacy and will have a D3 form on file with the Office of Graduate Studies by the stated deadline.

Further, I have met with the student to discuss expectations for (her or his) sustaining research, scholarship and academic progress concurrent with Mizzou 3MT® activities.

I hereby grant permission for my advisee to participate in this fall's Mizzou 3MT® communication skills training and competition activities.

Should my advisee be named a winner in the campus competition, I will allow (her or him) to represent the University of Missouri in a regional and/or national 3MT® competition next spring.

Student's signature _____ Date _____

Degree candidate in _____

Advisor signature _____ Date _____

Co-advisor signature (if applicable) _____ Date _____

Advisor questions? Contact Robin G. Walker, PhD walkerrob@missouri.edu or 882-8629

Please return a signed e-copy to mizzou3mt@missouri.edu by the required deadline posted on this page <http://gradstudies.missouri.edu/mizzou3mt/how-to-enter.php>

