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THESIS ADVISING AGREEMENT AND CERTIFICATE OF ACCEPTANCE

This is to certify that our signatures herewith signify that we agree to the following schedule to ensure the successful completion of the thesis titled _____. We understand that non-compliance to this schedule by (*Name of student*) _____ would mean a delay in his/her graduation. In case the Adviser is separated from the University, the student will be assigned a new Adviser by the Undergraduate Committee without prejudice to the student's progress.

Date	Activity
End of 1 st semester, AY _____	Application to potential thesis advisers.
Start of 2 nd sem AY _____	Attendance in undergraduate thesis orientation
2 nd sem AY _____	Start discussion of thesis topic with the Adviser and writing of thesis proposal.
Registration period 1 st semester, AY _____	Submission of approved thesis topic and proposal to the Institute of Biology Office through the Registration Adviser; the student cannot enlist in Bio 200 without the proposal endorsed by the Adviser.
1 st semester, AY 2020-2021	Implementation of research begins (lab experimentation (if applicable), field work (if applicable), data gathering and analysis)
1 st -2 nd week of October	Oral presentation of the thesis proposal
End of 1 st semester, AY _____	Preliminary results available; Progress report submitted to the Adviser; basis for grade for the 1 st semester enlistment
January – February	Continuation of thesis activities; data analysis; draft write-up
Midsem	Data gathering completed (on the administration side, no more permits will be issued to work on thesis except for valid reasons)
3 rd week of March	First draft submission to the Adviser
1 st – 2 nd week of April	Oral presentation of the thesis
3 rd week of April	Adviser-approved manuscript submitted to the Examiner
3 rd week of May	Deadline for submission of bound thesis manuscript and soft copy to the Director's office
4 th week of May	Submission of bound manuscript to the Dean's office

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It is also understood that the thesis will (please check the appropriate box/es):
 require the student to perform laboratory experiments in the Institute of Biology*.
 involve fieldwork in _____ (fieldwork constitutes any activity
 outside the Institute or the student's place of residence)*.
 be completed in its entirety in the student's place of residence.

* subject to the current guidelines of the Biosafety Committee of the Institute and the current quarantine conditions set by the national and local government

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(By signing below, the adviser certifies that he/she officially accepts the student as a thesis adviser; also, by signing below, the student and adviser certifies that they have read and understood the Undergraduate Thesis Guidelines of the Institute of Biology and agrees to comply with the said guidelines.)

NAME (please print)	SIGNATURE	DATE
STUDENT		
ADVISER		

Noted by (parent/guardian):

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For third enlistment in BIO 200

This is to certify that (*name of student*) successfully presented his/her thesis proposal to the (*academic group*) _____.

Name and signature of academic group head: _____