

## **SOM Graduate Studies Program: Ph.D. Mentor Assignment Form Instructions**

This form is required for all SOM graduate students admitted to a PhD degree program. When students identify a mentor/advisor, this form is completed and returned to the Graduate Studies Office (L102). If the student changes mentor/advisors, a new form must be submitted as soon as possible. This form is to be typewritten and electronically signed. Electronic signatures will auto-date the form. Signature fields will prompt users to create an electronic signature. The Associate Dean for Graduate Studies must approve transfers between graduate programs through a separate process described in the Graduate Council By-Laws. The Mentor/Advisor MUST be an approved member of the SOM Graduate Faculty. A full list of Graduate Faculty can be found on the Graduate Studies web site. The individual must meet the graduate program's requirements to serve as a mentor/advisor as described in the Graduate Council By-Laws. Individual programs may have additional requirements in addition to the Graduate Council requirements. It is each program's responsibility to ensure that the proposed mentor/advisor meets all requirements prior to submission of the Mentor/Advisor form.

### **Section 1A, 1B & 1C - Mentor Information and Financial Documentation**

The mentor/advisor responsible for providing financial support must complete and sign this section. Information about financial obligations can be found in the SOM Graduate Stipend Policy. Although it is generally not possible to guarantee support from a particular source for 4-6 years, there should be a reasonable expectation that the mentor or the Primary Administrative Unit will be able to support the student until completion of their Ph.D. degree. Students should be given information about the current source of support and any contingencies that might affect support in the future (e.g., impending competing grant renewals).

Mentor: Provide Contact information, Grant & OHSU Account Numbers, date and sign. Give the form to your financial coordinator.

Financial Coordinator: Provide contact information, sign and forward to the Primary Administrative Unit if needed or the Graduate Program listed in Section 2A

### **SECTION 2A: Student Information and Final Approval**

Students: Use your OHSU Student ID number, not your social security number. Phone numbers are required. Please choose the program from which you wish you receive your degree from the drop-down menu. Sign and date the form. Your signature confirms the selection of the proposed mentor listed on page one and the departmental program in which you wish to join.

Graduate Studies: Please confirm the mentor has a Graduate Faculty appointment.

### **SECTION 2B: Mentor's Primary Administrative Unit Approval**

This section must be completed and signed by the chair or director of the proposed mentor/advisor's Primary Administrative Unit. The PAU is the OHSU unit which pays the mentor/advisor's salary and that receives credit for indirect costs earned by the their grants. For adjunct faculty who do not receive salary from OHSU, the PAU is the OHSU unit that sponsored the adjunct appointment. Although it is generally not possible to guarantee support from a particular source for 4-6 years, there should be a reasonable expectation that the mentor or the Primary Administrative Unit will be able to support the student until completion of their Ph.D. degree according to the Graduate Studies Stipend Policy.

Chair/Director: Check the appropriate box regarding your support of the mentor's assignment and financial support. Electronically sign the form and have your program coordinator sign as well.

Program Coordinator: Electronically sign the form and forward to the program coordinator of the graduate program listed in section 2A.

### **SECTION 2C: Graduate Program Approval**

This section must be completed and signed by the Chair/Director of the graduate program selected by the student and listed in Section 2A.

Chair/Director: Your signature indicates that the Program: (a) Accepts the student into the graduate program, (b) Certifies that the proposed mentor/advisor meets the Program's criteria for mentors/advisors, including financial requirements, (c) Approves the assignment of the mentor/advisor to the student.

Program Coordinator: Your signature is also required to ensure administrative acknowledgement of the acceptance. Once the form has been signed, please forward to Graduate Studies. \*PMCB Student Forms go to the PMCB Coordinator.

# SOM Graduate Studies Program: Ph.D. Mentor Assignment Form - Page 1

## Section 1A : Mentor Contact and Primary Administrative Unit Information

**Mentor's Name:**

**Mentor's  
Signature**

**Mentor's Office or  
Lab Phone:**

**OHSU Mail Code:**

**Mentor's Primary  
Administrative  
Unit**

The Primary Administrative Unit is the OHSU department through which the faculty member's salary is paid and that receives credit for indirect costs earned by the faculty member's grant.

## Section 1B: Mentor's Statement of Current Financial Support (optional for Biomedical Informatics)

- I currently have grant support that will enable me to provide the stipend, fees and research related expenses for the student named in this PhD Mentor Assignment Form.

**Grant Agency No:**

**OHSU Account No:**

**Type of Funding**

**Funding End Date:**

**If the student will not be supported by the Mentor's Grant Funding, Complete the Section Below**

- I currently **DO NOT** have grant support for the student named in this PhD Mentor Assignment Form. Stipend, fees and research-related expenses will be paid by:

**Department/Division/Institute:**

**OHSU Account No:**

**Chair/Director's Name:**

**Chair/Director's Signature:**

## Section 1C: Individual responsible for creating and submitting the Stipend Memo to AP and working with the Bursar's Office to ensure Tuition & Fees are paid.

**Name:**

**Signature**

**Phone:**

**E-mail:**

By signing, I agree to submit all necessary forms for the above named student and communicate all pertinent information to Graduate Studies, PMCB, the Primary Administrative Unit and the Degree Granting Program Coordinator.

# SOM Graduate Studies: Ph.D. Mentor Assignment Form - Page 2

## Section 2A : Student Information

Student Name:

Student ID:

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Student Phone:

Student's Signature

### Student's Graduate Program Affiliation -

Please choose appropriate program from the drop down list below. This is the department you will be receiving your degree from.

## Graduate Studies Verification

Mentor's Graduate Faculty Appointment Verified

Verified by:

Date:

## Section 2B: Primary Administrative Unit Approval

As the the Chair/Director of the Mentor's Primary Administrative Unit, I approve of the assignment of this mentor to this student.

According to the Graduate Studies Stipend Policy, if in the future, the mentor is unable to provide financial support for the stipend and fees of the above named student and the student is in good academic standing, the Primary Administrative Unit is expected to assist the mentor by providing bridge funds. Details can be found on the Graduate Studies web page in the section under Forms & Policies/PhD Student Stipend Information

Yes, we **WILL** support for the above named student's stipend, fees & research expenses as explained in the Stipend Policy

No, we **WILL NOT** support the above named student's stipend, fees & research expenses. This may prevent the student from joining the lab.

**Chair/Director:** By signing, I agree that I have read and understand this form and the SOM Graduate Student Stipend Policy.

**Primary Administrative Department Administrator:** By signing, I affirm that I have been notified that the above named student is joining the lab of the faculty member listed on page 2. I agree to share information with Graduate Studies, PMCB and the degree granting program as necessary..

## Section 2C: Graduate Program Approval

As the the Director of the Student's Graduate Program, I approve of the assignment of this mentor to this student.

I have reviewed Page 2 of this form and understand the Financial Support Responsibilities.

**Graduate Program Director:** By signing, I agree that I have read and understand this form and the SOM Graduate Student Stipend Policy.

**Program Department Coordinator:** By signing, I affirm that I have been notified that above named student has joined my department. I agree to share information with Graduate Studies and PM CB as necessary..