

臺北醫學大學醫務管理學系碩士班暨碩士在職專班

共同指導教授同意書

Taipei Medical University Master program in School of Health Care Administration and
Professional master program in Health care administration
Thesis Co-Advisor's agreement

本人_____同意擔任醫務管理學系，

學生_____之碩士論文共同指導教授

I, _____, agree to be the co-advisor of Master's Thesis
of the student _____

碩士班(Master program)

碩士在職專班(Professional master program)

中華民國_____年_____月_____日

Signature and date : _____