| Group No.: | **\_\_\_\_** |
| --- | --- |

| Department | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| --- | --- |
| Degree Program: | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| Student Researchers: | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| Research Working Title: | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| Adviser: | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

I do hereby accept the invitation of the above-mentioned students to become their **MIXED-METHODS DATA ANALYST** for the **\_\_\_\_\_\_s**emester, academic year **YYYY-YYYY.** Concomitant with this is my acceptance of the following functions and responsibilities:

1. Guide the students in finalizing the title of the approved topic in cooperation with the thesis adviser.
2. Guide the students in aligning the purposes of the study and the statement of the problem in cooperation with the thesis adviser.
3. Guide the students in the preparation of research instruments together with the research adviser.
4. Guide the student determining the number of respondents/participants and in choosing the qualitative data analysis/statistical treatment to be used.
5. Guide the students in processing the data collected/gathered in the study.
6. Assist the students in the preparation of the categories/themes/framework and tables or figures following the APA format and formatting guidelines of the institution.
7. Assist the students in the analysis and interpretation of the results.

| Prepared by: | Recommended by: |
| --- | --- |
|  |  |
|  | **Signature over Printed Name** |  | **Signature over Printed Name** |
|  | Research Facilitator |  | Program Dean |
|  |  |  |  |

Conforme: **Signature over Printed Name**

Date:

| Approved: |  |  |
| --- | --- | --- |
|  |  |  |
|  | **Signature over Printed Name** |  |
|  | Vice President for Research and Innovation |