Choice of Thesis Lab Form

Note to faculty: You must contact the payroll specialist for your lab and let them know the student will be starting on your lab’s payroll, health benefits, and tuition remission. You will be asked to cover the student’s stipend, health benefits, and tuition remission starting November 17, 2024, to account for the rotation time. If the student decides to switch labs in the future, you are responsible for financially supporting the student for a one-month rotation.

Return completed form to cmb@bocklabs.wisc.edu.

It has been decided by mutual agreement that _________________________________ will
join _______________________________ lab starting December 9, 2024.

Faculty Name

Payroll contact for faculty’s home department:

Name: _______________________________

Phone Number: ________________________

Email: ________________________________

________________________________________
Student Signature

________________________________________
Faculty Signature

Faculty-please provide the payroll funding string