

Graduate School of Biomedical Sciences Procedures

2.0 – Graduate Student Transfer Procedure

Effective Date: March 8, 2023

Applies to: Students appointing or changing advisors.

Purpose: To facilitate the smooth transfer of graduate students to the departments and students who are appointing or changing advisors.

Procedures

1. After selecting or changing major advisors, graduate students must complete and submit the Appointment of Major Advisor, Compact, and the Financial Commitment forms to their program administrator.
2. Financial Commitment form: Students must obtain the signature of the new major advisor, department administrator, and the department HR/Administrative contact. The HR/Administrative contact must include their email address and phone number in the top right box of the form. The signature of the new advisor is required for students who are changing advisors. Incomplete forms will not be accepted.
3. First year students must submit the original forms to the program administrators for review no later than May 15 of the academic year, or by the date established by the student's program if earlier. Students who are changing major advisors must submit a new financial commitment form within five (5) business days of the change. The program administrator will forward the original forms to the GSBS finance team.
4. The effective date for the funding/transfer of first year students should be July 1 unless the student is appointed to a training grant or has approval from the Dean of GSBS for an alternate date.
5. Comment section: Complete the comment section for transfer dates later than July 1. Enter the reason for the delay and other pertinent information.
6. Please review BCM Policy 02.4.34, section 3-6 for guidance on student titles. (see link below)
https://intranet.bcm.edu/index.cfm?fuseaction=Policies.Display_Policy&Policy_Number=02.4.34
7. Appointment of the major advisor will not be official until all forms are properly completed and submitted.

Financial Commitment Form

THE GRADUATE SCHOOL of
BIOMEDICAL SCIENCES

Baylor
College of
Medicine

GRADUATE STUDENT INFORMATION:		MAJOR ADVISOR INFORMATION:	
_____ Name	_____ Matriculation	_____ Major Advisor Name	_____ Department
_____ Student's Program	_____ BCM ID#	_____ Dept. HR/Admin. Name	
_____ Graduate Program Administrator	_____ Phone Ext.	_____ Dept. HR/Admin. email Address	_____ Phone Ext.

FUNDING INFORMATION FOR STUDENT BEGINNING _____

DATE

COST CENTER/WBS ELEMENT BUSINESS AREA PERCENTAGE (%)

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POSITION TITLE and No.:

Position No. _____

MD/Ph.D. Yes No

Predoctoral Fellow (Gs)

Comments: _____

Research Assistant (Gs)

Other: _____

SIGNATURES:

I _____ (major advisor) have accepted _____ (student name) into my lab as a graduate student. I agree to provide support throughout this student's tenure in my lab, and I recognize that these costs may be subject to change.

The major advisor and the department/institution accepts full responsibility for funding the student's stipend, health insurance, and fringe benefits at the rate determined by Baylor College of Medicine each academic year.

Major Advisor Approval

Print Name

Date

Department HR/Admin. Approval

Print Name

Date

Department Administrator Approval

Print Name

Date

Retain a copy of this agreement in the department and return the original to the program administrator.