MAPÚA UNIVERSITY	FEEDBACK FORM MAPUA HOST PROFESSOR/ADVISER	Document No. : FM-IL-08-00 Effective Date: November 1, 2023

Category of Researcher:
☐ Dissertation ☐ MS Thesis ☐ BS Thesis ☐ Research Fellow ☐ Post Docs ☐ Others: _____

Name of Researcher:

Name of Host Professor/Adviser:

Name of Host Department/School:

Title of Project/Focus of Study:

Did you encounter difficulty in dealing with the IRS? Yes ☐ No ☐

If yes, please describe the difficulty encountered with the execution of the research project with the IRS.

Please write suggestion on how to improve the working relation with, or advising system for the IRS.

Submitted by:

_____
Printed Name and Signature of Host Professor

Date:

Read and Acknowledge by:

_____
ILRAD Research Coordinator

Date:

Thank you for your time. Your contribution is valuable to MAPUA University.
Note: Please submit this document to ilrad@mapua.edu.ph