Appendix 3 – Advisor Acceptance Letter

Place and date

To the Evaluation Committee of the Graduate Program in Health Sciences

I, [Full name of the advisor], holder of CPF number [advisor's CPF number], faculty member of the Graduate Program in Health Sciences, hereby formally accept [Full name of the applicant], holder of CPF number [applicant's CPF number], as my advisee in the research line of [Name of the Research Line], in the [Master's/Doctorate] program.

After a thorough review of the research pre-proposal entitled "[Title of the applicant's research pre-proposal]", I hereby declare that:

The research problem and the proposed objectives are relevant, well-defined, and aligned with the requirements of the Graduate Program.

The proposed timeline is feasible within the deadlines established by the program.

The expected final product meets the prerequisites and criteria established by the Graduate Program.

The applicant demonstrates the necessary skills and competencies to successfully carry out the research project.

I commit to supervising and mentoring the applicant throughout all stages of the research project, ensuring academic quality and compliance with the applicable ethical and institutional standards.

I further commit to guiding the aforementioned student in the development of their research, in full compliance with the program's guidelines and deadlines, as well as the current regulations. I will ensure regular monitoring of the student's academic and scientific progress, providing discussions, feedback, and the necessary support for the execution and successful completion of the project, in accordance with the quality standards required by the Graduate Program.

Having made this statement, I remain available for any further clarifications.

Sincerely,

[Handwritten signature or gov.br digital signature]

[Full name]

[Institutional email]