



MSC PROPOSAL REQUEST FORM

- Please read the information on MSc Proposal Defence in the EXS Handbook.
- All students are required to complete this form and return it to the EXS Graduate Office at least **three weeks** before the prospective MSc Proposal Defence date.

STUDENT'S NAME: _____ STUDENT #: _____

STUDENT'S EMAIL ADDRESS: _____

THESIS TITLE: _____

Please note that defences will only take place between 9-11:30 AM and 1:30-5 PM

DATE & TIME: _____ ROOM #: _____

EQUIPMENT: _____
 (ie. TELECONFERENCE PHONE / SKYPE, etc.)

SUPERVISORY COMMITTEE MEMBERS:

EMAIL ADDRESSES:

SUPERVISOR: _____

CO-SUPERVISOR: _____
 (if applicable)

MEMBER: _____

MEMBER: _____

NON-VOTING
 MEMBER: _____
 (if applicable)

SIGNATURES:

Student: _____

Date: _____

Supervisor: _____

Date: _____