



MSC FINAL DEFENCE REQUEST FORM

- Please read the information on MSc Final Defence in the Graduate Department of Kinesiology Handbook. Submit this form, the Thesis Approval form and a pdf copy of your final thesis (approved by committee) to the Graduate Department of Kinesiology (grad.kpe@utoronto.ca /BN110) at least **four weeks** before the prospective Final Defence date.

STUDENT'S NAME: _____ STUDENT #: _____

STUDENT'S EMAIL ADDRESS: _____

THESIS TITLE: _____

Please note that defences will only take place between 9 am-12 pm 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)

EXTERNAL EXAMINER:

EXAMINER NAME: _____ UNIVERSITY: _____

MAILING ADDRESS: _____

EMAIL: _____ TELEPHONE: _____

ATTENDANCE: IN PERSON VIA TELECONFERENCE

SIGNATURES:

Student: _____

Date: _____

Supervisor: _____

Date: _____