

## Ph.D. Thesis Proposal Report

Name of Student:		
Student Number:		
Start Session in Ph.D. Program:		
Research Group:		
Date of Presentation:		
Supervisor(s)	1)	2)
Committee Members:		
Recommendation of Committee:		
	D Pass	
	□ Other; if so, please specify:	
Signature of Supervisor(s):	1)	2)
Date of Signature:		

[1] If the composition of the committee is different from that outlined in the Ph.D. Regulations, please consult the Graduate Office prior to scheduling the presentation.

[2] If acceptance is based on any condition(s), the candidate must be notified in writing by the Supervisor with a copy to the Graduate Office.