

Thesis Submission Form

Tentative defence date and statement of the supervisor

You must submit this form along with the PDF copy of your thesis by [Service Request](#) under the Submission thesis Evaluation category

Note: select the "View All" button to display all the categories

Student Identification

FIRST NAME

LAST NAME

STUDENT NUMBER

NAME OF SUPERVISOR

NAME OF CO-SUPERVISOR (IF APPLICABLE)

Graduate program:

Level: MSc PhD

Program: BCH CMM EPI MIC NSC

Thesis Defence Information

The information below has been chosen in consultation with all the examiners and supervisor(s).

Tentative Defence Date:

DATE (YYYY-MM-DD)

START TIME

The Thesis Defence will be:

In Person

Virtual

Bimodal

The Graduate and Postdoctoral Studies Office reserves the right to request a new defence date if it does not conform to the guidelines or if a significant delay occurs during the evaluation process.

Statement of the Supervisor(s)

As the thesis supervisor(s), I confirm that I have reviewed the thesis and that the student may submit their thesis for evaluation.

SIGNATURE (SUPERVISOR)

DATE (YYYY-MM-DD)

SIGNATURE (CO-SUPERVISOR)

DATE (YYYY-MM-DD)