



APPOINTMENT OF THESIS SUPERVISORY COMMITTEE MEMBERS FORM

Graduate Thesis Supervisors should complete this form and return it to the Graduate Program Committee Chair **prior** to the student undertaking research.

STUDENT: _____

STUDENT NUMBER: _____

STUDENT EMAIL: _____

TENTATIVE THESIS TOPIC: _____

Does the proposed research require Ethics (human or animal) approval? Yes No

If yes, please forward documentation to the Faculty of Graduate Studies.

(CO) SUPERVISOR: _____
(PRINT NAME) (SIGNATURE)

(CO) SUPERVISOR: _____
(PRINT NAME) (SIGNATURE)

COMMITTEE MEMBER: _____
(SEE NOTE BELOW*) (PRINT NAME) (SIGNATURE)

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(SEE NOTE BELOW*) (PRINT NAME) (SIGNATURE)

Additional Comments:

Graduate Program Chair

Date

Dean of Graduate Studies

Date

**The supervisory committee must contain at least two faculty members from the student's graduate program. If any committee member is not a University of Winnipeg faculty member the supervisor must submit a copy of the proposed committee member's CV/resume and an explanatory letter along with this form.*