PHD THESIS SUBMISSION FORM

(Please see the instructions for scheduling a PhD oral in	the Final Oral Exam section of t	he Departme	nt's SharePoint site)
STUDENT NAME:	STUDENT NU	MBER:	
MAILING ADDRESS:			
THESIS TITLE:			
1st EXAMINER (thesis supervisor)		Voting	Non-Voting
2 nd EXAMINER		Voting	Non-Voting
3 RD EXAMINER			Non-Voting
4 th EXAMINER ("internal external")		_ Voting	Non-Voting
5 th EXAMINER (if applicable)		_ Voting	Non-Voting
THE THESIS IS READY FOR FINAL ORAL DIPLEASE SPECIFY ANY EQUIPMENT NEEDE	D FOR THE DEFENCE:	NO	
SUPERVISOR'S SIGNATURE:			
STUDENT'S SIGNATURE:			
EXTERNAL APPRAISER:			
INSTITUTIONAL AFFILIATION:			
EMAIL:			
WILL PARTICIPATE AS A VOTING MEMBER	? YES NO		
IN PERSON: BY PHONE: BY ZOO	OM: PHONE #		
DESIRED DATE AND TIME OF THE ORAL: _			