

THESIS

MRP

Ryerson University
MSc Applied Mathematics
Oral Examination/Defense Scheduling Request

Requested Examination Date: _____ Time: _____ Room _____

Student Name _____ Student ID _____

Thesis/MRP Title: _____

Thesis/MRP Supervisor(s): _____

Expected Term of Program Completion: Fall Winter Spring/Summer Year:

ORAL EXAMINATION COMMITTEE

NOTE: Committee composition is different for MRP and THESIS

THESIS - 4 member committee, one of them the Chair is a non-voting member, the other is a supervisor.

MRP - 2 voting members, one of them the supervisor, the other member also acts as Chair

Name:	Dept./Affiliated University/Campus:
Chair: (required for both MRP & Thesis)	
Member: (Supervisor)	
Member: (Thesis Only)	
Member: (Thesis Only)	
External Member (optional):	

***Please complete the section below for any External Member in the Oral Examining Committee:**

Name: _____

Position: _____

Address: _____

Phone Number and Email Address: _____

REQUIRED SIGNATURES

Name	Signature	Date
Student:		
Supervisor:		
Program Director:		

***If any multimedia equipment is required for the examination, students are responsible for making advance booking arrangements with the Mathematics department.*

PLEASE SUBMIT SIGNED FORM TO THE GRADUATE PROGRAM ADMINISTRATOR FOR BOOKING

As per Yeates School of Graduate Studies policy, the responsibility of the Supervisor and Oral Examination Committee is "Knowing the program and university regulations and standards for a dissertation, thesis or major project, and ensuring that the Graduate Student is aware of them. The dissertation, thesis or major project must be of an acceptable standard prior to submission to Examining Committee; if the supervisor believes that it is not ready for submission, or will not be ready within a particular time, the Graduate Student, the Program Director, and the Dean of Graduate Studies must be informed of the reasons in writing."