

**EXAMINATION REQUEST FORM**

Last Name: \_\_\_\_\_  
Student ID: \_\_\_\_\_  
Department/School: \_\_\_\_\_

First Name: \_\_\_\_\_  
Degree/Program: \_\_\_\_\_

**Thesis Title:**

☐ **Master's Degree**

Proposed examination date: \_\_\_\_\_

Send examination papers to: \_\_\_\_\_

☐ **Doctoral Degree**

Proposed examination date: \_\_\_\_\_

Send examination papers to: \_\_\_\_\_

External Examiner has been contacted: \_\_\_\_\_

**External Examiner's name and address:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Thesis has been/will be sent to the External Examiner: \_\_\_\_\_

**Graduate Coordinator**

I have reviewed the comments on the reverse of this page and:

☐ I recommend that this examination proceed.

☐ I do not recommend that this examination proceed at the present time.

Graduate Coordinator's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Student**

I acknowledge receipt of this advice from the Graduate Coordinator.

☐ I elect to proceed to defend on the above date. I do not

☐ elect to defend on the above date.

Student's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Office of Graduate Studies Use Only**

Processed by at Office of Graduate Studies: \_\_\_\_\_

Date: \_\_\_\_\_

# Summary of Advice To Student

Name: \_\_\_\_\_

Student Number: \_\_\_\_\_

**Advisor:** \_\_\_\_\_

- ☐ In my view, this thesis meets all departmental criteria and appears complete and correct.
- ☐ Thesis needs minor editorial corrections. I have provided detailed comments to the student under separate cover.
- ☐ Thesis needs major editorial corrections. I have provided detailed comments to the student under separate cover.
- ☐ Thesis is unacceptable in its present format. I have provided detailed comments to the student under separate cover.
- ☐ I have not read the thesis.
- ☐ I recommend that the examination proceed. ☐ I recommend that the examination not proceed at this time.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**Advisory Committee Member:** \_\_\_\_\_

- ☐ In my view, this thesis meets all departmental criteria and appears complete and correct.
- ☐ Thesis needs minor editorial corrections. I have provided detailed comments to the student under separate cover.
- ☐ Thesis needs major editorial corrections. I have provided detailed comments to the student under separate cover.
- ☐ Thesis is unacceptable in its present format. I have provided detailed comments to the student under separate cover.
- ☐ I have not read the thesis.
- ☐ I recommend that the examination proceed. ☐ I recommend that the examination not proceed at this time.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**Advisory Committee Member:**

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- ☐ I have not read the thesis.
- ☐ I recommend that the examination proceed. ☐ I recommend that the examination not proceed at this time.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**Advisory Committee Member:** \_\_\_\_\_

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- ☐ Thesis is unacceptable in its present format. I have provided detailed comments to the student under separate cover.
- ☐ I have not read the thesis.
- ☐ I recommend that the examination proceed. ☐ I recommend that the examination not proceed at this time.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**Student:** I acknowledge receipt of the above comments regarding my thesis.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_