



PhD Final Oral Examination Booking Request

This form is to be submitted to **the LMP Graduate Office** at least 8 weeks prior to the requested date.

Student Information:

Candidate: _____ Student Number: _____

Thesis Title: (Provide the full, correct, final title. This will be the title that will show on the student transcript; if the title changes, it must also be changed on ROSI.)

Thesis Abstract:

Please email us a copy of the thesis abstract (not longer than 350 words) as an attachment.

Exam Details:

Exam date: _____ Exam time: _____ (preferably 10 AM or 2 PM)

Committee Membership:

- 1. Supervisor _____
- 2. Co-Supervisor (if any) _____
- 3. External Appraiser _____
 - Area of Specialty: _____
 - Institutional Affiliation: _____
 - Full address: _____
 - _____
 - _____
 - _____

Will the External Appraiser attend the exam?

Yes, in person Yes, by teleconference No

Voting Members:

Supervisory Committee

Note: If the committee member has also participated in the supervision of the thesis, check 'yes'. If the committee member is joining the committee only for the purpose of the Final Oral Exam, check 'no'.

- | | | |
|----------|------------------------------|-----------------------------|
| 1. _____ | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| 2. _____ | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| 3. _____ | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| 4. _____ | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| 5. _____ | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| 6. _____ | <input type="checkbox"/> yes | <input type="checkbox"/> no |

Note: The Examination Committee must include **at least 4**, but no more than 6, voting members: one to three voting members from the Supervisory Committee, and at least one who has not been closely involved in the supervision of the thesis.

Equipment required (please check each item required):

- Conference Phone Computer Projector Other _____

(Please note that SGS does not provide computer facilities; if a laptop is required, it must be secured from the department.)

To be completed by the Graduate Office:

Exam Location: _____

Building: _____

Room number: _____