

Thesis Supervision Form

Please return the completed form to your Graduate Unit.

Section 1: Student Informat	ion						
Name:			Student	t Number:			
Degree:	Program:		<u>.</u>				
Home Department:	Date of First Registration	on: Terminal Date:		nal Date:			
Note: The acronyms refer to the OISE Section 2: Supervisory Com		·-					
Section 2. Supervisory Com	iiiittee						
 Ph.D. and Ed.D. stude When forming a supervisory of Each member must in If a nominee is not a A change in Thesis S To indicate a change 	ndicate his/her accepta member of U of T, hom upervisor must be acco	nce to serve on the department appropriate department appropriate by a raship, list all curre	the committee by his oproval must be give ationale ent members, but inc	visory committee s/her signature en slude signatures	e members s of new committee members only.		
Oh a da a sa a da a sa a da sa		Navy Oan			and the		
Check one and supply inforn	nation required:	l New Con	nmittee 🗆 Cha	ange in Memb	ersnip		
Supervisor:		Department:			Signature:		
Member:		Department:			Signature:		
Member:		Department:			Signature:		
Section 3: Title of Thesis							
Check one: ☐ Original Title ☐ Change in Title (attach rationale for change)							
Thesis Title:							
	ethics review. For for esearch.utoronto.ca/s for ethics review, and	rms, and more students). The d the protocol r	information regard supervisory/thesis must be approved	ding research committee m by the relevan	ethics review, see the Ethics ust approve the thesis proposal at ethics committee before data		
Course Requirements have be	en completed: ☐ Y	es □ No	If not completed,	attach explanat	tion on course exemption form		
I hereby approve the appointment of your Supervisor and/or Supervisory Committee and the title of your thesis. Your Supervisory Committee will act for the Department in giving you formal approval to your proposal, in receiving progress reports from time to time, and in the evaluation of the thesis. It is expected that you will take the initiative in keeping in touch with your Supervisory Committee.							

Home Chair/Coordinator's signature: _



Thesis Proposal Abstract Form

SECTION 1: Student Information

Student Name:								
Student Number:		Department:						
Degree:	Program:							
Date of First Registration	Terminal	Date:						
SECTION 2: Thesis Inform	ation							
Thesis Supervisor:								
Thesis Title:								
Will your thesis research	deal with human s	subjects?	Yes □	No □				
If yes, has an Ethical Re	view been complet	ed?	Yes □	No 🗆				
Brief Statement of Thesis	s Proposal:							
SECTION 3: Approval. To be completed by the Thesis Supervisor								
The student's Supervisory Committee and the Ethical Review Committee approved this thesis proposal.								
Date:		Signatur	те					