



Permission to Proceed

Student Name: _____

Student ID: _____

Program: _____

Status: *Standard Full-time* *Flexible Full-time*

Estimated date of completion: _____ / _____ *Month/Year*

Title of Thesis:

Thesis Committee Members:

Supervisor

Co-supervisor (*if applicable*)

Committee Member #1

Committee Member #2

Committee Member #3

Proposed Internal/External Examiner (*if known*)

I attest to the fact that the student has made all revisions to the thesis proposal document, as requested and specified in the "Thesis Committee Report on Proposal" form.

Supervisor

Date

Co-supervisor (*if applicable*)

Date

Graduate Coordinator

Date