



Permission to Proceed Form

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 (*if no co-supervisor*)

Proposed 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 "Examiner's Report on Proposal" form.

Supervisor

Date

Co-supervisor (*if applicable*)

Date

Graduate Coordinator

Date