

SCHOOL OF GRADUATE STUDIES

MRP/THESIS/DISSERTATION PROPOSAL APPROVAL

| Section 1: Student Information: | | | | | | | | | | |
|--|--|-----------------|-----------|-----------|------|--|--|--|--|--|
| Student Name: | | _ Student | Number: | | | | | | | |
| Program: | | | | | | | | | | |
| ☐ MRP ☐ Thesis | | Dissertation | | | | | | | | |
| Title: | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Section 2: (To be completed by the Supervisory This is to certify that above named student: | (Committee) | | | | | | | | | |
| This is to certify that above named student. | | | | | | | | | | |
| has successfully completed the examination of the MRP/Thesis/Dissertation proposal | | | | | | | | | | |
| and/or | | | | | | | | | | |
| the undersigned give their approval for | the undersigned give their approval for the student to proceed with the MRP/Thesis/Dissertation research | | | | | | | | | |
| without reservation | | with the attach | ed reserv | ation(s). | | | | | | |
| Is Research Ethics Board Approval required? | | YES | | NO | | | | | | |
| Section 3: Signatures | | | | | | | | | | |
| | | | | | | | | | | |
| Supervisor Name | Signatur | re | Date | | | | | | | |
| Co-Supervisor Name (if applicable) | Signatur | ıre | Date | | | | | | | |
| Committee Member Name | Signatu | | | | Date | | | | | |
| Committee Member Name | Signatu | Signature | | | Date | | | | | |
| Committee Member Name | Signature | | | Date | | | | | | |
| Committee Member Name | Signature | | Date | | | | | | | |
| Committee Member Name | Signature | | | Date | | | | | | |

Updated: 11/03/2025



SCHOOL OF GRADUATE STUDIES

MRP/THESIS/DISSERTATION PROPOSAL APPROVAL

| Section 4: (To be completed by the Graduate Program Coordinator/Chair) | | | | | | | | |
|--|---------------------|--|-----------------------------------|------|--|--|--|--|
| The Major Research Paper/Thesis/Dissertation proposal of the above named student has been approved | | | | | | | | |
| | without reservation | | with the attached reservation(s). | | | | | |
| Name | (print) | | Signature | Date | | | | |
| ☐ This form has been received by the School of Graduate Studies | | | | | | | | |
| Please submit complete forms to the School of Graduate Studies at sgs@nipissingu.ca | | | | | | | | |