

Section 1: Student Information

Student Name: _____ Student ID: _____

Topic: _____

Student Signature: _____

Section 2: Research (Co) Supervisor (s)

Name (print) _____ Signature _____ Date _____

Name (print) _____ Signature _____ Date _____

For SGS use only: the above is (are) eligible to supervise students: ☐ Yes ☐ No**Section 3: Additional Supervisory Committee Members****Conditions:** Please consult the Supervisory Committee Policy for more information (www.nipissingu.ca/sgs/)*MRP/Thesis: A minimum of one additional committee member is required.**PhD: A minimum of two additional committee members are required.**Committee members outside of Nipissing University must belong to a Canadian university. Provide a CV for committee members external to Nipissing University. Where additional committee members are spouses/partners, an additional committee member over and above the minimum is required. Required committee composition may be altered with approval from the Graduate Program Coordinator/Chair and the School of Graduate Studies*

Committee Member Name (print) _____ Signature _____ Date _____

Organization Name _____ Committee Member Email Address _____ Phone Number _____

Committee Member Name (print) _____ Signature _____ Date _____

Organization Name _____ Committee Member Email Address _____ Phone Number _____

Committee Member Name (print)
(if required, see conditions above) _____ Signature _____ Date _____

Organization Name _____ Committee Member Email Address _____ Phone Number _____

SCHOOL OF GRADUATE STUDIES

REQUEST TO DECLARE A SUPERVISORY COMMITTEE

Committee Member Name (print)
(if required, see conditions above)

Signature

Date

Organization Name

Committee Member Email Address

Phone Number

Section 4: Graduate Program Coordinator/Chair Signature

By signing below, the Graduate Program Coordinator/Chair supports the recommended Supervisor(s) and/or Committee Member(s).

Name (print)

Signature

Date

Section 5: Additional Signatures

Faculty Dean Name (print)

Signature

Date

Associate Vice-President, Research, Innovation
& Graduate Studies (print)

Signature

Date

Please submit complete forms and supporting documents to the School of Graduate Studies at sgs@nipissingu.ca