

Recommendation for Oral Examination Master's Thesis

Student information		
Surname	Given name(s)	
Student number	E-mail	
Program	Degree & level of study	Current status
Title of thesis		

Supervisory Committee approval	
The Supervisory Committee has read the above student's thesis and agrees that the version read is ready to proceed to oral defense. E-mail confirmation can be attached, in lieu of physical signatures.	
Supervisor name	Signature
Member name	Signature
Member name (if applicable)	Signature

Oral exam date, time and place		
The following is the recommended examining committee, date, time and place. All members have agreed to serve, once approved by the Dean. Please review FGS guidelines on examining committee for masters exams, available at: www.yorku.ca/grads/policies_procedures/thesis_dissertations_index.html		
Note: student is responsible for arranging presentation equipment, if required.		
Date (mm/dd/yyyy)	Time	Building & room

PLEASE TURN TO PAGE TWO

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Oral Exam Committee Membership

A thesis examining committee shall consist of at least three voting members, including the Chair, as follows:

- a. two graduate faculty members chosen from the program and/or supervisory committee, at least one of whom must be from the supervisory committee;
- b. one graduate faculty member at arm's length from the thesis, and normally from outside the program.

The Chair of the examining committee shall be chosen from among the voting members. Members of the student's thesis supervisory committee may be members of the examining committee, but the principal supervisor may not serve as the Chair of the examining committee. These are minimum requirements with respect to the composition of and quorum for thesis examining committees. Individual graduate programs may include one additional voting member on examining committees, in accordance with program requirements and procedures.

In exceptional circumstances, the Dean may approve a program director's recommendation that a York University faculty member who is not a member of the graduate faculty serve as a member (but not the Chair) of an examining committee. Such recommendations are to be accompanied by a brief rationale and an up-to-date curriculum vitae, which may be attached to the Recommendation for Oral Examination Form.

FGS Use	Committee Member name	Graduate program	E-mail
<input type="checkbox"/>	Chair (cannot be supervisor)		
<input type="checkbox"/>	Internal (at arm's length from thesis)		
<input type="checkbox"/>	Member 3		
<input type="checkbox"/>	Member 4 (if applicable)		

Approvals

Graduate program director name	Signature	Date (mm/dd/yyyy)
FGS associate dean name	Signature	Date (mm/dd/yyyy)

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