

The form must arrive at least six weeks before the proposed examination date as per [Graduate General Regulation 1.9.5](#)



First name		Surname	
Student number		Email	
Academic Unit		Degree	PhD EdD
Title			
Proposed examination date	Time	Location	



Must meet minimum composition as per [GGR 1.9.1](#)

Chair		Academic unit			SFU ID #		
Committee	First name	Last name	Email Address	SFU ID # or only if external to SFU: institution and rank	Attending in person?	Thesis ready for defence?	Signature
Supervisor					Y N	Y N	
Committee Member					Y N	Y N	
Committee Member					Y N	Y N	
Committee Member					Y N	Y N	
Committee Member					Y N	Y N	

Examiner: C"uwkvcn{"swcnkLgf"UHW"hcwnv{"ogodgt"qt"cuwkvcdn{"swcnkLgf"rgtuqp"yjq"ku"pqv"cu"ogodgt"qh"vjg"uwrgtxkuqt{"eqo"okvvgg" *kp"vjg"hcwnv{"qh"ctvu"cpf"Uqekcn"Uekgpegu."cp"gzco"kpgt"owuv"dg"htqo"qwvukfg"vjg"uwvfgpv"u"fg"rctv"ogpv0+"Vjku"Gzco"kpgt"owuv"gzco"kpgt" in person.

Name		Rank
Department	SFU ID #	Email

External examiner: CV is attached **(Required)**

Name		Rank
Department	Institution	
Address		
City	Province	Postal Code
Telephone	Email	
External examiner will examine:	<input type="checkbox"/> In person	<input type="checkbox"/> In absentia
	<input type="checkbox"/> Via tele/videoconference	
Possible conflict of interest		

Signature of supervisor confirms that:

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 """"""""c"vce"jgf"ngvgt"compqyngfigu"v"jku"cr"rtqxcn."pc"ogu"vjg"vkng"qt"rtqvqeqn"pw"odgt"wpf"gt"y"jke"j"vjg"cr"rtqxcn"y"cu"tgegkxgf."cpf"nkuvu"
 """"""""vjg"uwvfgpv"gvjgt"cu"vjg"rtkpekrcn"kp"pxguk"icvqt."eq/kpxguk"icvqt."qt"tgugcte"j"uvc"0

OR

No such approvals were required.

Supervisor name	Signature	Date
Co-Supervisor (if applicable)	Signature	Date
Graduate Chair name	Signature	Date