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| **Department of Ocean Sciences**  **Marine Biology**  **Graduate Program**  **Recommendations for Thesis Examiners M.Sc. \_ Ph.D.\_\_\_** | | |
|  Submit this form to the Graduate Secretary before submission of thesis.   M.Sc. Degrees require 2 examiners: 1 internal & 1 external **or** 2 internals.   Ph.D. Degrees require 3 examiners: 2 internals & 1 external **or** 1 internal & 2 externals.   Signatures of all members of the Supervisory Committee are required (last page). | | |
| Student Name: | | Student Number: |
| Supervisor/Co-supervisors: | | |
| Supervisory Committee: | | |
| Thesis title/topic: | | |
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| **Recommendations for Internal Examiner(s)** | | |
| (1) Name: | | |
| Address: | | |
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| Phone: | Fax: | Email: |
| Reasons for recommendation: | | |
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| (2) Name: | | |
| Address: | | |
|  | | |
| Phone: | Fax: | Email: |
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| **Recommendations for External Examiner(s)** | | |
| (1) Name: | | |
| Address: | | |
|  | | |
| Phone: | Fax: | Email: |
| Reasons for recommendation: | | |
|  | | |
| |  |  |  | | --- | --- | --- | | (2) Name: | | | | Address: | | | |  | | | | Phone: | Fax: | Email: | | Reasons for recommendation: | | | | Is | | | |  | | | | | |

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| **Signatures of Supervisory Committee** | | |
| **NAME** | **SIGNATURE** | **DATE** |
| Co-Supervisor: |  |  |
| Co-Supervisor: |  |  |
| Committee Member: |  |  |
| Committee Member: |  |  |
| Committee Member: |  |  |

Graduate Studies Committee