STEP 2Thesis Supervise	or(s) Identification The following student in the	_	e to serve in a ve named thes	•	role for the above nam			
Primary Supervisor								
Committee Member	Name	Affi	iliation	Signature	1			
Committee Member	Name	Affi	lliation	Signature	Signature			
Committee Member	Name /		lliation	Signature	Signature			
	Name	Affi	iliation	Signature	;			
STER - ProgramCoordina	ator/Director approval							
Student has been continually registered in program and is currently registered								
The Committee is appropriate for this udent								
The Committee conforms to expectations set out in the FGSR Policy on Selection of Supervisors								
Name	Signature		Date					
			FGSR USE ONLY					
Return form tα Faculty of Graduate Studies and Resear		ch	Approved	Yes	No 🔲			
(1	P • Œ › • u µ X		Signature Dean(FGSR)r Designate:		Designate:			
			Date:					