



School of Population and Public Health

THESIS PROPOSAL COVER SHEET/SIGNATURE SHEET

This form is to be appended to the thesis proposal when submitted to the Thesis Screening Panel.

Date:		
Name:		
Program:		
Program start date:		
Division:		
Course work completed:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Comprehensive exam passed:	<input type="checkbox"/> Yes	<input type="checkbox"/> No If not completed, anticipated date:
Title of thesis proposal:		
Work completed on the study to date:		
We have read and support this proposal being submitted to the Thesis Screening Panel.		
Supervisor name	Signature	Date
Committee members	Signature	Date

Enquiries:

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