



Notice of Field of Study Oral Examination

This form must be used when a Candidacy component requires an examination committee.

Please note that the form is to be kept at the program and forwarded to the Faculty of Graduate Studies only if there is an appeal of a failed examination.

Student and Examination Information

Name of Student: **Daphne Nakhid**

Department/Program: **MDNS**

Degree: **PhD** Specialization:

Date and Time of Examination: **July 23, 2021 at 9:00 AM**

Place of Examination: **Zoom**

Examining Committee: **Dr. Yunyan Zhang, Neutral Chair**
Dr. Catherine Lebel, Supervisor
Dr. Carly McMorris, Co-Supervisor
Dr. Ben Gibbard, Supervisory Committee
Dr. Frank MacMaster, Supervisory Committee
Dr. Brandy Callahan, Internal Examiner, Clinical Psychology
Dr. Angelique Jenney, External Examiner, Social Work

Acknowledgment

I am aware of, and have agreed to these arrangements.

Date: *Student Signature:*

Date: *Supervisor Signature:*

Date: *Co-Supervisor Signature:*

The Graduate Program Director's signature below approves the membership of the examination committee.

Date: *Graduate Program Director Signature:*