



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: **Nasser Abdullah**
Department/Program: **MDSC**
Degree: **PhD** Specialization:
Date and Time of Examination: **September 22 @ 12:00PM**
Place of Examination: **Zoom / HSC G3344**
Examining Committee:
Dr. Pierre Von Der Weid, Neutral Chair, MDSC
Dr. Christophe Altier, Supervisor, MDSC
Dr. Simon Hirota, Supervisory Committee, MDGI
Dr. Tuan Trang, Supervisory Committee, MDNS
Dr. Shalina Ousman, Internal Examiner, MDNS
Dr. Andre Buret, External Examiner, BISI

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:*