

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.

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Student	and	Exam	ination	Intor	mation

Name of Student: Luke Brown
Department/Program: MDIM

Degree: PhD

Date and Time of Examination: Friday, May 7, 2021 at 1:00 PM

Place of Examination Zoom

Examining Committee: Dr. Justin MacDonald , Neutral Chair

Dr. Bryan Yipp, Supervisor

Dr. Derek McKay, Supervisory Committee
Dr. Rebecca Baron, Supervisory Committee
Dr. Dr. Simon Hirota, Examiner, Department
Dr. Doug Mahoney, Examiner, Department

Acknowledgment

I am	i aware of	, and hav	e agreed t	to these	arrangements.
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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: