

# Graduate Science Education

### Thesis Proposal Approval Meeting Set Up Form for PhD students only

#### **Community Health Sciences**

#### Submit to GPA no later than 4 weeks before your meeting

Student Name: Emergency Contact Phone # Specialization: Choose an item.

Supervisor:

UCID:

Program: PhD

Components:

**Courses Completed\*\***: Yes No Please list courses completed:

**Research Integrity Day Completed\*\*:** Yes No Date: Click or tap to enter a date.

Sex and Gender Module \*\*:

Yes No Date: Enter a date.

\*\*These components **must** be completed before the Field of Study Exam Ethics CSM requires that students working with human primary material or subjects will also need approval

from the Conjoined Health Research Ethics Board (CHREB) prior to initiating their research.

Ethics Application in Progress

Student added to Supervisors' Ethics (Copy of addition letter on file)

Ethics Application to be initiated

Not Applicable

## **Meeting Details**

All members of the Supervisory Committee must attend the meeting.

**Proposal Evaluation & Approval Consists of a student presentation (max 15 mins), evaluation, and discussion.** It is recommended that the room is booked for 2 hours to allow time for all components of this evaluation.

| Date:             | Time: | Location: Zoom |
|-------------------|-------|----------------|
| Proposal Title:   |       |                |
| Supervisor:       |       |                |
| Co-Supervisor:    |       |                |
| Committee Member: |       |                |
| Committee Member: |       |                |
| Committee Member: |       |                |

Graduate Program Director Approval

Date: