



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: Linjun Xie UCID:
Department/Program: MDBC
Degree: **PhD** Specialization: N/A
Date and Time of Examination: Dec 12, 2022 @ 1pm
Place of Examination: GSE G344
Examining Committee:
TBD. , Neutral Chair
Dr. Peng Huang , Supervisor
Dr. Paul Mains , Supervisory Committee
Dr. Li-Fang (Jack) Chu , Supervisory Committee
Dr. John Cobb , Examiner, Department
Dr. Sarah McFarlane, Examiner, Department

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:*