

## **Notice of Thesis Oral Examination**

Questions about the use of this information should be directed to the FOIP Advisor, Faculty of Graduate Studies, (403) 220-4938.

Information						
Candidate: Buie,Elizabeth Mary		Date: 2025-05-21				
Department/Program: Medical Science			<del>1 =</del>		_	
Degree: Master of Science Specialization: N/A						
Final Thesis Title: Global Incidence of Appendectomy: A Population-Based Study of the Organisation for Economic Co-operation and Development						
Date of Examination: 2025-06-17 Tin	ne of Examina	tion: 2:00 PM F	Place of Exa	amination: H	SC G344	
Information						
This exam is: Open						
The examination will be conducted und	der the currer	nt Thesis and Thesis	examination	on regulation	ns and	
administrative processes.						
Will there be at least one person attending the exam remotely?  ☐ Yes ☐ No Notes:  • Remote examinations will be conducted according to FGS guidelines. • Proctors are not required for remote examinations. • In the case of examinations in which two or more individuals are attending in person, the Neutral Chair must also attend in person. • The Neutral Chair must be provided with contact information of the student and all examiners in case of emergency or unanticipated situations.  If the student is attending the examination remotely, they must provide the telephone number of at least one person (e.g., friend, roommate, relative) who can be contacted in case the connection with the student is lost with no possibility of re-connection or for emergencies. This information must be communicated to the Neutral Chair and will be used only for the above stated purposes.  **Name of contact person(s):**  **Telephone number(s):**						
Examination Committee				Attending remotely?	Clear of conflict of interest	
Dr Gil Kaplan, Supervisor, Medical Science					N/A	
Dr May Lynn Quan, Supervisory Committee Member, Community Health Sciences					N/A	
Tamara Irena Gimon, Examination Committee Mbr, Community Health Sciences						
Dr Mary E Brindle, Internal Examiner, Cor	mmunity Healtl	h Sciences				
ii'taa'poh'to'p, the University of Calgary's Indigenous Strategy, seeks to ensure that policies, practices and procedures are supportive and respectful of Indigenous ways of knowing, doing, connecting and being. Indigenous graduate students and those who are working with Indigenous Elders or Knowledge Keepers are encouraged to incorporate Indigenous ceremonies and/or traditions into their exams.						
Will the student incorporate Indigenous ceremonies and/or traditions into the exam?  ☐ Yes ☐ No ☐ If yes, please submit a completed Indigenous Cultural Protocol Plan form with the Notice of Thesis Oral Examination.						

Acknowledgement						
The student's signature below ack	nowledges the examinatio	n arrangements.				
Date:	Candidate Signature:	Elizabet Rain				
Supervisor's Acknowledgement						
The Supervisor's signature below verifies:						
That the Internal Examiner meets the						
has well-established research rep						
has expertise in the area of the st						
A has experience in evaluating theses at the graduate level						
has experience in supervising to completion at the graduate level						
is not a close personal friend of the Supervisor						
has not collaborated with the Supervisor in the past five years						
✓ is not closely related to, or has not worked with the candidate						
If the above criteria have not been met, <b>please attach a memo</b> explaining why the program still wishes to						
make the recommendation.						
✓ That all members of the Supervisory committee have reviewed the student's research, a relevant written						
sample of the material related to the thesis, and/or the draft thesis document and provided written consent						
that the defence can be scheduled. All consents must be held at the program.						
✓ That the thesis will be/has been sent to the examination committee at least three weeks before the thesis						
examination**	ent to the examination com	illitiee at least tillee weeks belore tile tilesis				
	net sunervisor is responsible	for collecting from the examiners proof of				
**If the above criterion has not been met, supervisor is responsible for collecting from the examiners proof of agreement to read the thesis in a shorter period of time.						
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, ,	Supervisor Signature:	\\agree				
The Graduate Program Director's signature below verifies*:						
That the Internal Examiner is external to the student's program (if required).						
That the External Examiner has not served as an external examiner in the student's program in the past two years.						
*If the above criteria have not been met, <b>please attach a memo</b> explaining why the program still wishes to						
make the recommendation.						
<b></b>						
The student named above has met all program requirements to proceed to Oral Examination, completed the						
required course work, maintained a grade point average of at least 3.0 where applicable, appropriate formal						
ethics approval has been received for the student's research, and document of Supervisory Committee						
approval is on file.						
If approval is conditional, please of	lescribe:	0 ^				
		$\mathcal{J}(\mathcal{P})$				
Date: May 22, 2025 GPD name (pr	int): Shirin Bonni	GPD Signature: L. Poni				
For Faculty of Graduate Studies use only						
Membership of Examination Committee □ Approved □ Not Approved						
Date: Dean, I	Dean, Faculty of Graduate Studies (or designate) Signature:					