

## **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: Helmi,Summer Ahmed  | Date: 2021-12-13  | UCID:   | D                             |
| Department/Program: Biochemistry & Molecular Biol  |   |   |                               |
| Degree: Doctor of Philosophy Specialization: Stem Cells  |   |   |                               |
| Final Thesis Title: Effect of Notch Signaling Pathway Inhibition on the Osteogenic Differentiation of Pluripotent Stem Cells.  |   |   |                               |
| Information  |   |   |                               |
| This exam is: Open   |   |   |                               |
| The examination will be conducted under the current Thesis and Thesis examination regulations and administrative processes.  |   |   |                               |
| Will there be at least one person attending to Yes  ☐ No Notes:  • Remote examinations will be cone • Proctors are not required for reme • In the case of examinations in whe Chair must also attend in persone • The Neutral Chair must be provided of emergency or unanticipated site.  If the student is attending the examination reperson (e.g., friend, roommate, relative) who with no possibility of re-connection or for ememory of the student and will be used only for the student of contact person(s): | nducted according to FGS guide note examinations. Thich two or more individuals are ded with contact information of tuations.  The motely, they must provide the coan be contacted in case the pergencies. This information missing the coan be contacted in case the pergencies. | e attending in person, the student and all exame telephone number of at connection with the student be communicated | least one                     |
| Date of Examination: 2021-02-11 Time of  | of Examination: 1:00 PM   | Place of Examination:   | Hybrid                        |
| Examination Committee  |   | Attending remotely?   | Clear of conflict of interest |
| Dr Jason de Koning, Neutral Chair, Biochemistry and Molecular Biology  |   | N/A   |                               |
| Dr Derrick Emile Rancourt, Supervisor, Biochemistry and Molecular Biology  |   | N/A   |                               |
| Dr Heather Jamniczky, Supervisory Committee Member, Medical Science  |   | N/A   |                               |
| Dr Deborah Marie Kurrasch, Supervisory Committee Member, Biochemistry and Molecular Biology  |   | N/A   |                               |
| Dr John Andrew Cobb, Internal Examiner, Bi   | ological Sciences   |   | 0                             |
| Dr Lisheng Wang, External Examiner, Univer   | rsity Of Ottawa   | Yes   | 42                            |

| 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 acknowledges the examination arrangements.   |  |  |  |
| Date: 2o21-12-13 Candidate Signature:  |  |  |  |
| Supervisor's Acknowledgement   |  |  |  |
| The Supervisor's signature below verifies:   |  |  |  |
| That the Internal Examiner meets the following criteria:   |  |  |  |
| A has well-established research reputation   |  |  |  |
| A has expertise in the area of the student's research  |  |  |  |
| 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, please attach a memo explaining why the program still wishes to make   |  |  |  |
| the recommendation.  |  |  |  |
| That the thesis meets the minimum standard set out in Thesis and Thesis Examination Regulations Section L.1.  That the Supervisor, and other members of the Supervisory Committee if applicable, have reviewed the   |  |  |  |
| student's research, 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.   |  |  |  |
| Date: Dec / 3 Z + Z ) Supervisor Signature:  |  |  |  |
| 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, please attach a memo explaining why the program still wishes to make   |  |  |  |
| the recommendation.  |  |  |  |
| 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 describe:   |  |  |  |
| Dec 16, 2021 Justin A. MacDonald   |  |  |  |
| Date: GPD name (print): GPD Signature:   |  |  |  |
|  |  |  |  |
| For Faculty of Graduate Studies use only   |  |  |  |
| Membership of Examination Committee ☐ Approved ☐ Not Approved  |  |  |  |
| Date: Dean, Faculty of Graduate Studies (or designate) Signature:  |  |  |  |