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: McKinley Pawlak
UCID: [Redacted]
Department/Program: MDNS
Degree: PhD Specialization: N/A
Date and Time of Examination: Wednesday, August 9, 2023 @ 1:00pm (MST)
Place of Examination: Fully Remote (Zoom)
Examining Committee:
- Dr. Keith Sharkey, Neutral Chair
- Dr. Daniel Kopala-Sibley, Supervisor
- Dr. Signe Bray, Supervisory Committee
- Dr. Catherine Lebel, Supervisory Committee
- Dr. Andrea Protzner, Internal Examiner
- Dr. Brae Anne McArthur, External Examiner

Acknowledgment

I am aware of, and have agreed to these arrangements.

Date: Student Signature:
Date: Supervisor Signature:

The Graduate Program Director's signature below approves the membership of the examination committee.

Date: Graduate Program Director Signature:

July 2016