



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: **Deshan Perera** UCID:

Department/Program: **MDBC Degree: PhD**

Date and Time of Examination: **Sep 15 , 2021 @ 3:00PM**

Place of Examination: **Zoom**

Examining Committee: **Dr. David Schriemer, Neutral Chair**
Dr. Quan Long ,Supervisor
Dr. Jason de Koning, Supervisory Committee Member
Dr. Marco Galo , Supervisory Committee Member
Dr. David Anderson , Internal Examiner
Dr Laura Sycuro , External Examiner

Acknowledgment

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

Date: Student Signature:

Date: **Aug 25, 2021** 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: