



Notice of Field of Study Exam

Student and Examination Information

Name of Student: **Anika Sehgal** Date: Nov 18, 2020
Department/Program: **MDCH**
Degree: **PhD** Specialization: **HSR**
Date and Time of Examination: **February 5, 2021 – 2-5 pm**
Place of Examination: **ZOOM**
Examining Committee:
Jocelyn Lockyer, Neutral Chair
Cheryl Barnabe, Supervisor
Lindsay Crowshoe, Co-supervisor
Rita Henderson, Supervisory Committee
Adam Murry, Supervisory Committee
Pamela Roach, Internal Examiner
Kelly Zarnke, External Examiner

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:*