

**Notice of Field of Study Exam**

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| ***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: | **Jamie Benham** | Date: Sept 2/20 |
| Department/Program: | **MDCH** |
| Degree: | **PhD** | Specialization: Epidemiology |
| Date and Time of Examination: December 4, 2020 at 9 am |  |
| Place of Examination: ZOOM |  |
| Examining Committee: | Jocelyn Lockyer, Neutral ChairRonald Sigal, SupervisorChristine Friedenreich, Supervisory Committee Doreen Rabi, Supervisory CommitteeBernard Corenblum, Supervisory CommitteeSofia Ahmed, Internal ExaminerPatricia Doyle-Baker, External Examiner |
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| **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: Sept 2, 2020*  *Graduate Program Director Signature:* |