



Notice of Field of Study Exam

Student and Examination Information

Name of Student: **Meng Wang** Date: Sept 22/20
Department/Program: **MDCH**
Degree: **PhD** Specialization: **BIOSTATS**
Date and Time of Examination: **Nov 26, 2020 at 9 am**
Place of Examination: **Zoom**
Examining Committee:
Jocelyn Lockyer, Neutral Chair
Tolu Sajobi, Supervisor
Eric Smith, Co-supervisor
Thierry Chekouo Tekougang, Supervisory Committee
Nils Forkert, Supervisory Committee
Zahra Goodarzi, Internal Examiner
Rob Deardon, 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:*