



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: **Nazanin Vaziri**

Department/Program: **MDSC**

Degree: **PhD** Specialization: **Molecular & Medical Genetics**

Date and Time of Examination: **September 7, 2021 @ 10:00AM**

Place of Examination: **Zoom**

Examining Committee: **Dr. Deborah Dewey, Neutral Chair**
Dr. Dr. Chad Bousman, Supervisor, MDSC
Dr. Steven Greenway, Co-Supervisor, MDSC
Dr. Thomas Raedler, Supervisory Committee, MDNS
Dr. Timothy Shutt, Supervisory Committee, MDBC
Dr. Aru Narendran, Internal Examiner, MDSC
Dr. Simon Hirota, External Examiner, MDGI

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:*