



## 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: Rory Mulloy

Department/Program: MDMI

Degree: **PhD** Specialization:

Date and Time of Examination: **May 8, 2023, at 1:00 p.m. Room HSC G344**

Place of Examination:

Examining Committee:

**TBA, Neutral Chair**

**Dr. Jennifer Corcoran , Supervisor**

**Dr. Antoine Dufour, Supervisory Committee**

**Dr. Guido van Marle, Supervisory Committee**

**Dr. Andrew Leidal, Internal Examiner**

**Dr. Selena Sagan, External Examiner, McGill University**

### 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:*