



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: **Simmone D'souza**

Department/Program: **MDMI**

Degree: **PhD** Specialization:

Date and Time of Examination: **September 20, 2021 at 9:30 a.m.**

Place of Examination: **G344 and Zoom**

Examining Committee: **Dr. Nathan Peters, Neutral Chair, Attending in Person**
Dr. Carla Coffin , Supervisor, Attending in Person
Dr. Trushar Patel, Co-Supervisor, Attending Via Zoom
Dr. Jennifer Corcoran, Supervisory Committee, Attending in Person
Dr. Guido van Marle, Supervisory Committee, Attending in Person
Dr. Anthony Schryvers , Internal Examiner, Attending in Person
Dr. Sabine Gilch, External Examiner, Attending in Person

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:*