

## Notice of Thesis Oral Examination

*Questions about the use of this information should be directed to the FOIP Advisor, Faculty of Graduate Studies, (403) 220-4938.*

### Student Information

Candidate: Szczepanski, Holly Elizabeth	Date: 2021-02-08	UCID: <span style="background-color: black; color: black;">XXXXXXXXXX</span>
Department/Program: Gastrointestinal Sciences		
Degree: Master of Science      Specialization: N/A		
Final Thesis Title: Characterizing the role of NR4A1 in the regulation of intestinal smooth muscle cell phenotype and function		

### Examination Information

This exam is: Open			
<b>The examination will be conducted under the current Thesis and Thesis examination regulations and administrative processes.</b>			
Date of Examination: 2021-03-15	Time of Examination: 1:00 PM	Place of Examination: Zoom	
Examination Committee	Attending remotely?	Clear of conflict of interest	
Dr Simon Hirota, Supervisor, Gastrointestinal Sciences	Yes	N/A	
Dr Robert Newton, Supervisory Committee Member, Cardiovascular/Respiratory Sciences	Yes	N/A	
Dr Pierre-Yves Y Von Der Weid, Supervisory Committee Member, Medical Science	Yes	N/A	
Dr Michael G. Blennerhassett, External Examiner, Queen's University	Yes	<input type="checkbox"/>	

### Student's Acknowledgement

<b>The student's signature below acknowledges the examination arrangements.</b>	
Date:	Candidate Signature:

### Supervisor's Acknowledgement

<p><b>The Supervisor's signature below verifies:</b></p> <p>That the Internal Examiner meets the following criteria: *</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> has well-established research reputation</li> <li><input type="checkbox"/> has expertise in the area of the student's research</li> <li><input type="checkbox"/> has experience in evaluating theses at the graduate level</li> <li><input type="checkbox"/> has experience in supervising to completion at the graduate level</li> <li><input type="checkbox"/> is not a close personal friend of the Supervisor</li> <li><input type="checkbox"/> has not collaborated with the Supervisor in the past five years</li> <li><input type="checkbox"/> is not closely related to, or have not worked with the candidate</li> </ul> <p>*If the above criteria have not been met, please attach a memo explaining why the program still wishes to make the recommendation.</p> <p><input type="checkbox"/> That the thesis meets the minimum standard set out in Thesis and Thesis Examination Regulations Section L. 1.</p> <p><input type="checkbox"/> That the Supervisor, and other members of the Supervisory Committee if applicable, have reviewed the</p>
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student's research, relevant written sample of the material related to the thesis, and/or the draft thesis document and provided written consent that the defence can be scheduled. All consents must be held at the program.

Date: \_\_\_\_\_ Supervisor Signature: \_\_\_\_\_

### Graduate Program Director's (GPD) Acknowledgement

**The Graduate Program Director's signature below verifies: \***

- That the Internal Examiner is external to the student's program (if required)
- That the External Examiner has not served as an external examiner in the student's program in the past two years.

\*If the above criteria have not been met, please attach a memo explaining why the program still wishes to make the recommendation.

- The student named above has met all program requirements to proceed to Oral Examination, completed the required course work, maintained a grade point average of at least 3.0, appropriate formal ethics approval has been received for the student's research, and document of Supervisory Committee approval is on file.

***If approval is conditional, please describe:***

Date: \_\_\_\_\_ GPD name (print): \_\_\_\_\_ GPD Signature: \_\_\_\_\_

### For Faculty of Graduate Studies use only

Membership of Examination Committee  Approved  Not Approved

Date: \_\_\_\_\_ Dean, Faculty of Graduate Studies (or designate) Signature: \_\_\_\_\_