



## 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: Brayden Lyons UCID:

Department/Program: MDIM

Degree: **PhD** Specialization:

Date and Time of Examination: **June 21, 2022 @ 12pm**

Place of Examination: Zoom

Examining Committee: **Neutral Chair TBD**  
**Dr. Daniel Muruve, Supervisor**  
**Dr. Justin Chun, Co-Supervisor**  
**Dr. Mark Gillrie, Supervisory Committee**  
**Dr. Craig Jenne, Supervisory Committee**  
**Dr. Simon Hirota, Internal Examiner**  
**Dr. Bas Surewaard, 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:*