

CHEMICAL ENGINEERING GRADUATE PROGRAM YEATES SCHOOL OF GRADUATE STUDIES

Added Co-Supervisor Application

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Student's Name:				ID Number:	
Degree Program:	□Ph.D.		□ M. <i>A</i>	A.Sc.	☐M.Eng.
First term of Registration:		☐ Fall	☐ Winter	Spring/Summer Year:	
Added Co-Supervisor:					
	Name: _				
Depar	rtment:				
University:					
Organization (if applicable):					
Organization (if applicable).					
The term you wish this change request to be effective: Fall Winter Spring/Summer Year:					
Student's signature: Date:					
Added Co-Supervisor's signature: Date:					
Approvals:					
Comment Someonica m	□ A	d \	- 4		Date:
Current Supervisor:	Approved Denied		ed		_ Date:
Current Co-supervisor:	☐Approved ☐Denie		ed		Date:
(if applicable)					
Program Director:	☐Approved ☐Denie		ed		Date:
Trogram Brector.	r.pp.				
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Distribution:		Supervisor			
Current Co-Supervisor (if applicable)					
Added Co-Supervisor Graduate Program Director					