

BIOMEDICAL ENGINEERING GRADUATE PROGRAM
YEATES SCHOOL OF GRADUATE STUDIES
Added Co-Supervisor Application

Student's Name:		ID Number:	
Degree Program:	<input type="checkbox"/> Ph.D.	<input type="checkbox"/> M.A.Sc.	<input type="checkbox"/> M.Eng.
First term of Registration:	<input type="checkbox"/> Fall	<input type="checkbox"/> Winter	<input type="checkbox"/> Spring/Summer Year: _____
Added Co-Supervisor:			
Name: _____			
Department: _____			
University: _____			
Organization (if applicable): _____			
The term you wish this change request to be effective: <input type="checkbox"/> Fall <input type="checkbox"/> Winter <input type="checkbox"/> Spring/Summer Year: _____			

Student's signature: _____ Date: _____

Added Co-Supervisor's signature: _____ Date: _____

Approvals:

Current Supervisor: Approved Denied _____ Date: _____

Current Co-supervisor: Approved Denied _____ Date: _____
(if applicable)

Program Director: Approved Denied _____ Date: _____

Distribution:

- Student file
- Current Supervisor
- Current Co-Supervisor (if applicable)
- Added Co-Supervisor
- Graduate Program Director