



BIOMEDICAL ENGINEERING GRADUATE PROGRAM
YEATES SCHOOL OF GRADUATE STUDIES

Seminar Scheduling Request

Student Name:	Student ID:
Abstract Title	
Thesis/Project Supervisor(s):	

Seminar Date: _____ Time: _____ a.m./p.m. ²Room: _____
DD/MM/YY

Student's Signature (*see notes below*)

Date

Supervisor's Signature

Date

Seminar Coordinator's Signature

Date

Program Director's Signature

Date

If any multimedia presentation equipment is required for the examination, students are responsible in making advance booking arrangements with the Media Services office located in room KHE227 (ext. 4444).

<p>Note:</p> <ol style="list-style-type: none"> 1. An oral examination will only be scheduled for MASC and PhD students after the required seminars are given. 2. Room booking is arranged with the Seminar Coordinator 3. An abstract must be e-mailed to bmegrad@ryerson.ca at the time this form is submitted.
