



Yeates School of Graduate Studies
Graduate Program in Civil Engineering

MASc Thesis Oral Examination Scheduling Request

Table with 2 columns: Student Name, Student ID, Supervisor, Thesis Title, First Term of Study, Expected Term of Completion

Table for Oral Examination Committee with 2 columns: Role (Chair, Member), Department

Table with 3 columns: Oral Examination Date, Time, Room

Student's Signature _____

Supervisor's Signature _____

Note: If any multimedia equipment is required for the exam, students are responsible in making advanced booking arrangements.

Confirmation by Program Director

This Project is Examinable: Yes No

Program Director's Signature _____