

MA MRE SECOND READER APPROVAL FORM

This form is to be completed by the student and supervisor when the Second Reader has been selected and agreed to participate. This form must be submitted to the Undergraduate and Graduate Advisor and the Institute Administrator.

Student's name:

Student number:

Date:

MRE Title:

Supervisor's name:

Department/Institute/Program:

Signature:

Second reader's name:

Department/Institute/Program:

Signature:

APPROVAL OF THE UNDERGRADUATE AND GRADUATE ADVISOR

Advisor's signature:

Date: