

## Department of Health Sciences Faculty of Science

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Please fill out this form completely and forward to the Graduate Administrator for the setup of your defence. This form must be submitted <u>in advance</u> of the proposed defence date (<u>4</u> <u>weeks – MSc in Health Sciences</u>) in order to complete the appropriate paperwork for submission to Graduate Studies.

Email: claire.macarthur@carleton.ca Phone: ext. 7099

Student Name			
Student Number		Student Email	
Department			
Thesis Title			
Defence date & time			
In the blank space below please provide contact information of your examination board members:			
Chair of the Defence (to be filled out by the department)			
Thesis Supervisor/ co-supervisor name and email(s)			
External examiner (outside student's home unit) Name and email			
Internal examiner (within student's home unit or program) Name and email			
Any additional board member(s) name and email(s)			