

M.A. Thesis/MRE Advisory Committee Form

The following committee has agreed to advise:

Candidate's name

Student #

on their work in the M.A. program in the Institute of Interdisciplinary Studies at Carleton University subject to the regulations of the Graduate Faculty Board of the University and the Department.

Correspondingly, the M.A. candidate: _____
having enrolled in, and been admitted to the program, signifies in the selection and acceptance of these committee members, their willingness to accept the committee's advice and voluntarily carry out the program of study and the examination which they have jointly formulated.

COMMITTEE MEMBERS:

Supervisor: _____

Department/Institute/Program: _____

Signature: _____

(Co-)Supervisor: (if applicable):

Department/Institute/Program: _____

Signature: _____

Committee Member (optional):

Department/Institute/Program: _____

Signature: _____

Approval of Graduate Program Supervisor: _____

Date: _____

COMMITTEE CHANGES:

WITHDRAWAL OF COMMITTEE MEMBER:

I, _____, have withdrawn from participation in the above named student's MA Thesis Advisory Committee.

Approval of Graduate Program Supervisor: _____

Date: _____