Signature (must be different from above)

Office of the Dean and Vice-Provost Theses and Dissertations

grad.ubc.ca | graduate.thesis@ubc.ca

TUDENT INFORMATION: Given Name:			Student Number: Family Name:	
os://www.grad.ubc.ca/faculty-staff/p	policies-procedures/superv	vision-graduate-stud	ents-non-member	s-faculty-graduate
://www.calendar.ubc.ca/vancouver	/index.cfm?tree=12,204,35	50,773		
a non-member of the Faculty of dent, special approval is required eligible, the non-member should propriate qualifications. In most dervised by a G+PS member. Note ulty of Graduate and Postdoctor	I from both the discipling normally be actively eng ases where a non-memb e that at least half of the	ary Faculty and the gaged in research, oer of G+PS is gran	e Faculty of Grad experienced wit ted supervisory	uate and Postdoctoral Studies. In graduate education, and holo privileges the student is co-
recommend that the following	person be approved to	supervise or co-su	pervise the abo	ve named student:
minee's name:	Nominee's email:			
posed supervisory role:	Co-supervisor		Sup	pervisor
JBC: Faculty stream: Educa	ational Leadership	☐ Partner	Clinical	UBCO
Title: Profe	ssor	Associate Profe	essor	Assistant Professor
C Position if not listed above:				
UBC CWL:		UBC Employee	e Number:	
not UBC: Non-UBC employer:				
Title or position held	:			
e are requesting approval for:	Additional students in	program (approval v	alid for 5 years)	This student only
additional students for five yea				
ase attach ALL of the following	ng:			
Indication (from the graduate pro	gram) of the particular qu	alifications that ma	ke the nominee s	uitable
Statement from nominee assenting supervisor responsibilities. See Stand discussed by the student, gradurrangement, including provision to	upervision / Roles and Resuluate advisor, and the pros	ponsibilities / Supe	r visor . Supervisor	responsibilities should be reviewe
Nominee's current CV [not require	ed for UBCO faculty in the F	Research Stream wh	o hold Supervisor	y membership in CoGS]
Names of the other committee m	embers (please list):			
Approval of Research Sup	ervisor (or G+PS co-supervis	sor; the nominee should	sign when they are rec	commended as the primary supervisor):

Program

Date (yyyy/mm/dd)

Name (must be different from above)