SUPERVISORY COMMITTEE

NOMINATION INSTRUCTIONS

The Supervisory Committee (SC) consists of the student’s supervisor plus two or more other members. Please list the names and area of expertise of your proposed SC members on the attached form as well as a working title for the thesis research to be pursued.

If SC members are not Biology staff, full contact information must be given on the form (position, affiliation, address, email, fax number, phone number).

If the supervisor is an associate member of the Biology Department, at least one of the SC members must be a full-time member of the Biology staff.

It is the student’s responsibility to make certain that the proposed members are willing to serve on the committee.

Please note that, according to departmental regulations, the first meeting of the SC for a new student must take place no later than 6 months after enrolment. At the first meeting the SC will evaluate the student’s educational background and select courses required for the degree. M.Sc. candidates should present the SC with a well thought-out research proposal at this first meeting; this can be preceded by informal discussions with the SC as well as the supervisor to define the goals of the project. Ph.D. candidates will also discuss research matters with their SC at the first meeting, but it is not necessary at this time to decide upon a particular thesis research project. (See Biology web site for further details.)

Students starting graduate studies in September must have their first SC meeting no later than March 1; students starting in January must have their first SC meeting no later than July 1;

Return the form below to Ancil Gittens, either by fax (514-398-5069), scanned e-mail attachment to ancil.gittens@mcgill.ca in person or by mail to Ancil Gittens, Department of Biology, Stewart Biology Building, Room W4/8, 1205 Avenue Dr. Penfield, Montreal, QC, H3A 1B1.
SUPERVISORY COMMITTEE NOMINATIONS

Date: _______________

Student's Name: ________________________________

Student's Supervisor: ___________________________

Working Title of Thesis: ____________________________________________________________

If the suggested member is from outside the Biology Department please indicate position, affiliation, address, phone, fax, and email address.

Suggested Members:  Area of Expertise:

1. ______________________________________________________  __________________________

2. ______________________________________________________  __________________________

3. ______________________________________________________  __________________________

The nominees have been asked and are willing to serve _____

Supervisor's Signature: _______________________________________

Student's Signature: ________________________________