NAME ________________________________ STUDENT NUMBER ____________________
ADDRESS ________________________________ FIELD ________________________________
ADVISOR/SUPERVISOR ________________________________
PHONE #: ( _______ ) ________________________________ E-MAIL: ________________________________

PROGRAM: (circle) M.A. M.Sc. PH.D.  
Collaborative Program: (if any) ________________________________

STATUS:  Full-time [  ] Part-time [  ] On-campus [  ] Off-campus* [  ]  
*You must arrange for off-campus status with your Supervisor and the Graduate Office.

PART A: To be completed by all graduate students:

COURSE ENROLLMENT 2021-22 (COURSES OR RST 9999Y) (refer to handbook for program requirements)

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PART B: All Master’s students:

Course Requirement:  2021-22 registration will complete [  ] will not complete [  ] **
**If your 2021-22 registration will not complete your course requirement, please explain: (attach a separate sheet if necessary)

________________________________________________________________________________
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Continued on page 2
PART C: Ph.D. Students only:

Thesis title: ________________________________________________________________

________________________________________________________

Describe your plan to complete the following program requirements: *(attach a separate sheet if necessary)*

Course work: ________________________________________________________________

Advisory Committee:*list members:* ____________________________________________

Most recent Mentoring Meeting date: __________________________________________

Language Requirement: ______________________________________________________

Thesis proposal submission and defense *date:* __________________________________

Research progress: __________________________________________________________

*For post proposal Ph.D. students*: When did your doctoral committee last meet?: ________________________

PART D: For All Students:

STUDENT'S SIGNATURE: ___________________________ Date ________________________

I hereby acknowledge that I have met with this student on this date:

_________________________________________ Date ________________________

Advisor/Supervisor

APPROVED

Graduate Coordinator DATE