

## Recommendation for Oral Exam Master's Thesis

Student information		
Surname,	Given name(s)	
Student Number	E-mail	
Program	Degree & level of study	Current status
Title of Thesis		
Supervisory Committee Approval		
The Supervisory Committee has read the above student's thesis and agrees that the version read is ready to proceed to oral defence. E-mail confirmation can be attached in lieu of physical signatures.		
Supervisor Name	Signature	
Member Name	Signature	
Member Name (if applicable)	Signature	
Oral Exam, date, time and place		
The following is the recommended examining committee, date, time and place. All members have agreed to serve, once approved by the Dean. Please review <a href="#">FGS guidelines</a> on examining committee for Master's exams.		
Note: student is responsible for arranging presentation equipment, if required		
This form must be submitted to the Office of the Dean, Graduate Studies, at least 15 days in advance of the oral examination.		
Date (mm/dd/yyyy)	Time	Building & Room

**PLEASE TURN TO PAGE TWO**

**Privacy:** Personal information in connection with this form is collected under the authority of *The York University Act, 1965* and will be used for educational, administrative and statistical purposes. If you have any questions about the collection, use and disclosure of personal information by York University, please contact: Faculty of Graduate Studies, 230 York Lanes, (416)736-2100 x 55521.

## Risk Assessment

A thesis examining committee shall consist of at least three voting members, including the Chair, as follows:

- a. two graduate faculty members chosen from the program and/or supervisory committee, at least one of whom must be from the supervisory committee;
- b. one graduate faculty member at arm's length from the thesis, and normally from outside the program.

The Chair of the examining committee shall be chosen from among the voting members. Members of the student's thesis supervisory committee may be members of the examining committee, but the principal supervisor may not serve as the Chair of the examining committee. These are minimum requirements with respect to the composition of and quorum for thesis examining committees. Individual graduate programs may include one additional voting member on examining committees, in accordance with program requirements and procedures. If the Chair is also the Internal Member or Member 3, please list in both sections.

In exceptional circumstances, the Dean may approve a program director's recommendation that a York University faculty member who is not a member of the graduate faculty serve as a member (but not the Chair) of an examining committee. Such recommendations are to be accompanied by a brief rationale and an up-to-date curriculum vitae, which may be attached to the Recommendation for Oral Examination Form.

\* If the Chair is also the Internal Member or Member 3, please list in both sections.

FGS Use	Committee Member Name	Graduate Program	E-mail
<input type="checkbox"/>	Chair* (cannot be supervisor)		
<input type="checkbox"/>	Internal (arm's length from thesis)		
<input type="checkbox"/>	Member 3		
<input type="checkbox"/>	Member 4 (if applicable)		

### Approval

Graduate Program Director Name	Graduate Program Director Signature	Date (mm/dd/yyyy)
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### FGS Processing

Grad Milestone & Progression Coordinator Name	Date (mm/dd/yyyy)
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