SCHOOL OF URBAN AND REGIONAL PLANNING
DECISION SHEET FOR MASTER’S REPORT/THESIS PROPOSAL

Name of Student: ____________________ Name of Supervisor: ____________________

Report ☐ ☐ Thesis ☐ ☐ Date Submitted: ____________________

Title: ___________________________________________________________________

Does the report/thesis proposal indicate the use of humans as research subjects (as defined by University policies on research ethics)?
Yes ☐ No ☐

(If yes, the student must make an application to the Unit Research Ethics Board.)

Does the Report require a Safety Plan for the research?
Yes ☐ No ☐

(If yes, the student must make an application under OCASP.)

Supervisor’s Recommendation:
______________________________________________________________________________________
______________________________________________________________________________________

Reviewer’s Comments:
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________

(Supervisor to take into account reviewer’s comments. In case of reviewer’s recommendation for rejection/resubmission of proposal, the supervisor is to discuss his/her decision with the reviewer.)

Supervisor’s Decision:

a) Accept without any revisions ☐ ☐

or b) Accept with the following revisions ☐
______________________________________________________________________________________
______________________________________________________________________________________

or c) Resubmit the proposal with the following revisions ☐
______________________________________________________________________________________
______________________________________________________________________________________

or d) Reject ☐ ☐

Signatures: Approved by Supervisor ____________________ Dated: ______________

Noted by Director ____________________ Dated: ______________