

Form P1 – Supervisory Committee Confirmation

To be sent by the Supervisor to the Gender Studies Graduate Office.

Student name:

Supervisor:

Gender Studies

SUPERVISORY COMMITTEE	
Working project title:	
Committee Members	
Supervisor	Co-Supervisor
Department	Department
Committee member	Committee member
Department	Department
Acknowledgement	
Student signature	Date
Supervisor signature	Date
Co-Supervisor signature (if applicable)	Date
Committee member signature	Date
Committee member signature	Date
Graduate Chair signature	Date