

APPLIED SCIENCES – MASTER’S ORAL THESIS EXAMINATION FORM (MASC) – CHEE, CHEM, CIVL, ECEN, PEPA, GSGE, MAST, MEME, MINE

The personal information on this form is collected under the authority of the Royal Charter of 1841, as amended. The information will be used to process the master’s oral thesis examination.

All Master's Oral Thesis Examinations are OPEN unless a request based on justifiable reasons has been approved by an associate dean (SGS) - (See Regulation <http://www.queensu.ca/calendars/sgsr/Thesis.html> Attendance at the oral thesis examination)

STUDENT NAME:		STUDENT#:	
DEFENSE DATE:		TIME:	
LOCATION:		DEPARTMENT:	
E-MAIL(S):		DEGREE:	MASC
THESIS TITLE:			

COMMITTEE	NAME:	DEPT:	FOR SGS OFFICE USE:
CHAIR: (HEAD OR DELEGATE)			
SUPERVISOR(S)			
EXAMINER (Internal):			
EXAMINER (see a, b or c below):			

- a) Examiner from the department OR
- b) Examiner from external department OR
- c) In exceptional circumstances, (see note 1. Below), external to Queen’s University

NOTES:

1. In the exceptional case, where a faculty member of another Department, with sufficient expertise, cannot be found within Queen’s University, a suitable member from another nearby institution may be recommended for the approval of the Dean of the School of Graduate Studies.
2. The Chair of the Master’s Thesis examination committee is not a voting member of the committee
3. **In cases where ALL members of the Master’s Thesis Examination Committee are internal to the department, approval of both the Departmental Graduate Coordinator and the Department Head shall be required.**

Before the oral examination may proceed, the student must be currently REGISTERED and paid all fees and have completed all course requirements.

Submit this form by e-mail - completed and signed at least 10 working days before the defense to SGS

thesis@queensu.ca and include the following:

- 1) transcript and 2) co-authorship form (if applicable)

Exam confirmed with: (e-mail sent)	Supervisor(s):	
Student		
Chair		
Examining Committee	Graduate Coordinator: (or Head, if Grad Coordinator is the supervisor)	
SGS	Department Head: (see #3 above)	
Date:		

APPLIED SCIENCES – MASTER’S ORAL THESIS EXAMINATION RESULT FORM

CHEE, CHEM, CIVL, ECEN, PEPA, GSGE, MAST, MEME, MINE

STUDENT NAME:		STUDENT#:	
DEFENSE DATE:		TIME:	
DEGREE:	MASTER OF APPLIED SCIENCE	DEPARTMENT:	

RESULT: **PASSED** **REFERRED** **FAILED**

List required changes (if any) and person(s) who must verify the changes (use a separate page if necessary)

NOTE: If necessary, this form may be copied and passed along to the examiner responsible for confirming required revisions.

COMMITTEE	NAME:	DEPT:	PASS	*REFER	FAIL	SIGNATURE
SUPERVISOR(S)						
EXAMINER (INT.)						
EXAMINER:						
EXAMINER:						

Date: _____ **Chairperson's Signature:** _____

IMPORTANT: *In all cases of referral, the nature of the revisions and/or additional work, and/or the deficiencies associated with the oral thesis examination, must be specified in writing by the Chair to avoid dispute or ambiguity. When outlining the revisions and/or additional work required, and/or the holding of a second oral thesis examination, the Chair must be as specific as possible. **These comments will be passed on to the candidate in a letter from the School of Graduate Studies as revisions and/or improvements that must be met for the thesis to be reconsidered.**

After defense, submit by e-mail this form completed and signed by each committee member including the chair with the conduct form(s) to thesis@queensu.ca.

For SGS office use only

Transcript checked by: Completion Date: Convocation Session:



APPLIED & SCIENCES – MASTER'S ORAL THESIS EXAMINATION CONDUCT FORM

CHEE, CHEM, CIVL, ECEN, PEPA, GSGE, MAST, MEME, MINE

STUDENT NAME:		STUDENT#:	
DEFENSE DATE:		DEGREE:	MASTER OF APPLIED SCIENCE
DEPARTMENT:			

After the oral thesis examination, examiners are to submit this report on the conduct of the examination to the Head of the Department or the Graduate Coordinator. In particular, any member of the committee who is external to the candidate's home department shall submit this report.

Please comment on the conduct of the examination. If the structure of the examination deviated from the written procedures or the process was unfair in any way, please indicate the nature of the concern.

COMMENTS:

DATE: _____

SIGNED: _____