

DALHOUSIE UNIVERSITY SCHOOL OF NURSING PhD (Nursing) Program

Thesis Supervisory Committee Approval Form

Directions:

c:

Thesis committee

Student (original to student file)

Parts 1 through 3 must be completed by the graduate student <u>prior</u> to obtaining signatures for part 4. A signature on part 4 implies agreement with the selected research approach and the topic selected for study. It further implies agreement to serve on the supervisory committee in the capacity indicated.

1. Student Name:			
2. Topic Selected:			
3. Approach (basic	description of design):		
4. Thesis Cor	mmittee Composition:		505 A 12 - 1/5 - 1
Thesis Supervisor			FGS Adjunct/External Scholar Approval
Thesis Supervisor	Print	Signature	
Thereis Co. Communication	Department	Date	
Thesis Co-Superviso	Print	Signature	<u></u>
Reader	Department	Date	Date
	Print	Signature	
Reader	Department	Date	Date
	Print	Signature	
Reader	Department	Date	Date
	Print	Signature	
	Department	Date	Date
		osition of the thesis committee approved on	
Date		Associate Director Graduate Pro	grams