

**PhD Final Oral Examination Booking Information Sheet**

**NOTE:** This form is used to facilitate exam bookings. It should be completed by the graduate student and submitted to the EEB Graduate Office (if sending it by email: [gradadmin.eeb@utoronto.ca](mailto:gradadmin.eeb@utoronto.ca)) a **minimum of 7 weeks** prior to the requested date. The form **must not** to be forwarded to SGS.

# Student Information:

Name: Number:

Thesis Title:(Provide the full, correct, final title. This will be the title that will show on the student transcript; if the title changes, it must also be changed on ROSI.)

# Composition of the Examining Committee:

1. The committee must include:
   1. five or six voting members. Voting members must be members of the graduate faculty at U. of T.
   2. at least two examiners who have **not** been closely involved in the supervision of the thesis (that is, they were not on the supervisory committee). EEB recommends **three\*** such members – the external appraiser plus two members from the candidate’s graduate unit or another graduate unit of the University (\*see the EEB Grad Handbook about finding a backup person if there will only be the two <https://eeb.utoronto.ca/education/graduate/graduate-handbook/> )
   3. Up to three members of the supervisory committee **including** the supervisor(s). For students with co-supervisors, only one committee member may vote at the defense. For students with 3-4 members of their supervisory committee (not including the supervisor), 1-2 of them may vote at the defense (but see (b) above). Non-voting committee members may attend the defense if they wish but they rarely do. If they wish to attend, include their name(s) in the table below as a non-voting member(s).
2. A non-voting Chair will be appointed by SGS
3. The Examination Committee may also include up to two additional non-voting members.

For the external examiner provide the following additional information:

Institutional Affiliation:

Area of Specialization:

Mailing Address including Department name:

Phone Number:

The external examiner (please put Y by the relevant option): will attend the exam in person: \_\_ OR will attend the exam online or by phone: \_\_ OR will not participate in the exam \_\_.

\*If attending online, if Skype will be used, please provide Skype ID:

List below the exam committee members with email addresses. If the exam committee member was involved in the supervision of the thesis, including serving as a member of the supervisory committee, check ‘Yes’. If the exam committee member is joining the committee only for the purposes of the Final Oral Exam, check ‘No’.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Name | Email | Thesis supervision including supervisory committee? Yes No | |
| Supervisor |  |  |  |  |
| Co-supervisor or Member1  (please highlight one) |  |  |  |  |
| External |  |  |  |  |
| Member |  |  |  |  |
| Member |  |  |  |  |
| Member |  |  |  |  |
| Non-voting  Member (optional) |  |  |  | |
| Non-voting  Member (optional) |  |  |  | |

**Examination Committee Members**

**On the table above, did you tick ‘Yes’ for the faculty members who were on your supervisory committee? If not, please go back and do that now.**

**Exam Details:**

Exam date: Exam time: \_\_\_\_\_\_\_\_\_\_\_

**Equipment Required:** (check each item required): Conference Phone Computer Projector

Do you want to replace the traditional oral presentation with the exit seminar (see the EEB Grad Handbook for the pros and cons of doing this)? Yes  No

If yes, please provide the date and time of the exit seminar. Note: allow at least 65 minutes for your introduction by your supervisor, your seminar, and questions and then allow sufficient time before the exam for a (short) break as well as any travel time needed to move between locations:

Seminar date and location: \_ Seminar time: \_

**Exam Location** (to be filled out by Graduate Administrator):

Building: Room number: