PhD Program in Health York University

Notification of Comprehensive Paper Supervisors & Timeline

Program Field:	
Student:	ID #:
COMPREHENSIVE P	APER #1
Title:	
Supervisor:	
Supervisor's Signature: (Please sign or attach e-mail acknowledging the agreement of being a member AND approval of Abstract and Reading List for Comprehens AND scheduled dates.)	
COMPREHENSIVE PAPER #2	
Title:	
Supervisor:	
Supervisor's Signature: (Please sign or attach e-mail acknowledging the agreement of being a member AND approval of Abstract and Reading List for Comprehens AND scheduled dates.)	
Student Documents & Timeline Agreed with	Comprehensive Supervisors
☐ I have submitted the Abstract and Reading List for Comprehensive Paper 1	
☐ I have submitted the Abstract and Reading List for Comprehensive Paper 2	
□ Scheduled date for my submission of papers to the supervisors is	
□ Scheduled date for my oral examination of both papers is	
Student Signature:	Date Signed
Graduate Program Director's Signature	Date Annroyed

Students are required to submit this notification form and documents to the Graduate Program Office and gain approval from the Graduate Program Director prior to writing the 2 comprehensive papers.