## **Jury report form**

STUDENT IDENTIFICATION		
LAST NAME	FIRST NAME(S)	STUDENT NUMBER
EMAIL	ACADEMIC UNIT / DISCIPLINE	DEGREE SOUGHT
		MASTER'S THESIS DOCTORAL THESIS
TITLE OF THESIS		
DEFENCE DATE	DEFENCE LOCATION	
YEAR MONTI	H DAY	
	THESIS SUPERVISOR(S)	
THESIS SUPERVISOR	YEAR MONTH DAY	SIGNATURE
I THESIS SUPERVISOR	DATE	SIGNATURE
THESIS CO-SUPERVISOR	YEAR MONTH DAY  DATE	SIGNATURE
	MEMBERS OF THE JURY	
NAME (PRINT)	YEAR MONTH DAY	SIGNATURE
NAME (PRINT)	DATE	SIGNATURE
NAME (PRINT)	YEAR MONTH DAY  DATE	SIGNATURE
	YEAR MONTH DAY	
NAME (PRINT)	DATE	SIGNATURE
NAME (PRINT)	YEAR MONTH DAY  DATE	SIGNATURE
	<del>.</del>	
	YEAR MONTH DAY	
NAME (PRINT)	DATE	SIGNATURE



CHAIR OF THE JURY  (THIS SECTION MUST BE COMPLETED AND SIGNED BY THE CHAIR OF THE JURY.)		
PLEASE SPECIFY THE CHANGES THAT MUST BE MADE TO THE THESIS AND WHICH INDIVIDUALS MUST APPROVE THEM (THESIS SUPERVISOR AND/OR ONE OR MORE EXAMINERS).		
VERDICTS		
(FOR DETAILS, PLEASE SEE THE <u>ACADEMIC REGULATION C-7 ON THESES</u> .)		
THE THESIS MEETS ALL THE REQUIREMENTS OF THE DEGREE, BUT WITH MINOR CORRECTIONS.  PLEASE FILL OUT THE CORRESPONDING SECTION ABOVE.		
2. THE THESIS MEETS ALL THE REQUIREMENTS FOR THE DEGREE, BUT MAJOR CORRECTIONS ARE REQUIRED. PLEASE FILL OUT THE CORRESPONDING SECTION ABOVE.		
THE THESIS MUST BE AMENDED AND THE EVALUATION THE STUDENT MUST WITHDRAW FROM THE PROCESS AND DEFENCE MUST BE REPEATED BEFORE THE THE REQUIREMENTS FOR THE DEGREE.  THE THESIS MUST BE AMENDED AND THE EVALUATION THE STUDENT MUST WITHDRAW FROM THE PROGRAM (SECOND DEFENCE OR DEFENCE OR DEFENCE OR DEFENCE OR DEFENCE OR A AFTER EVALUATION OF AN AMENDED THESIS).		
CHAIR YEAR MONTH DAY SIGNATURE DATE		
IMPORTANT  DOES THE JURY WISH TO RECOMMEND THE THESIS FOR A PRIZE?  YES NO		

## NOTICE OF COLLECTION OF PERSONAL INFORMATION

Your personal information is collected under the authority of the *University of Ottawa Act*, 1965, in accordance with the *Freedom of Information and Protection of Privacy Act* of Ontario and University Policy 90. The personal information you provide on this form will be used by the University for purposes consistent with the administration of University programs and activities, and the provision of services and performance of functions including recruitment, admission, enrolment, academic programs, evaluations, official document requests, financial aid and awards, assisting student associations and graduation. If you have questions about the collection, use and disclosure of your personal information, please contact <u>InfoService</u>.

## **Academic unit contact information**

