

# MSc Supervisory Committee Form

V20190319

**Note to student and supervisor:** Please return this form, in-person or by email, to the Graduate Assistant, Department of Psychology, SSC, 7<sup>th</sup> Floor, Room 7406, Email: [edrysda4@uwo.ca](mailto:edrysda4@uwo.ca)

Section I: Student Information	
First and Last Name of Student:	
Student Number:	
Year in which MSc degree was started:	Fall _____

Section II: Supervisory Committee Members		
<p><b>Supervisory Committee Members:</b> The supervisory committee for master's students consists of:</p> <ol style="list-style-type: none"> <li>1. The supervisor, who must be a member of SGPS and have MSc supervisory privileges.</li> <li>2. At least two other members, one from the Psychology Department.</li> </ol> <p>Remaining members, if approved by the Associate Chair - Graduate Affairs, may be a part-time member of faculty, or a scientist or professional outside the Department or outside the University.</p>		
Supervisory Committee	Name (please print)	I have agreed to serve on the supervisory committee of the above-named student (please sign)
Committee Member #1 Supervisor(s):		
Committee Member #2 Department of Psychology:		
Committee Member #3: Please specify:		
Form Submission Date:		

Please note that any future changes to the above-named student's supervisory committee will require the approval of the Department of Psychology's Associate Chair – Graduate Affairs. Please contact the Graduate Assistant for more information.