REPORT ON M.Sc. THESIS DEFENCE

TO BE COMPLETED BY THE CHAIR OF THE EXAMINATION COMMITTEE, INCLUDING ALL SIGNATURES AND COMMENTS, AND SUBMITTED TO THE DEPARTMENT OF PHYSIOLOGY, MEDICAL SCIENCES BUILDING, ROOM 3209.

NAME OF STUDENT: ___________________________ DATE OF DEFENCE: ________________

TITLE OF THESIS: _____________________________________________________________________________________________

EVALUATION

<table>
<thead>
<tr>
<th>Grasp of field around research topic</th>
<th>Poor (1)</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Background and rationale of research</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Quality of research</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Originality of research (student contribution)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Coherence and effectiveness of presentation</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Ability to answer questions</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Overall evaluation</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Assessment of written thesis</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

Comments (append additional pages, if necessary)

Do ALL MEMBERS of the Committee agree that the student has successfully completed the ORAL exam in partial fulfillment of the requirements for the MSc degree? YES   NO

Do ALL MEMBERS of the Committee agree that the student has successfully completed the WRITTEN thesis in partial fulfillment of the requirements for the MSc degree? YES   NO

(If NO to either question, then the Exam Chair can defer the final decision to the Graduate Coordinator, and should submit detailed notes on the proceedings with an explanation why the committee came to this decision)

Does the Committee require changes to be made to the thesis? YES (Minor or Major ) NO

If yes, (print name) ___________________________ is responsible for ensuring that these corrections are satisfactorily carried out. This person will then write a brief letter to the Graduate Coordinator indicating that corrections have been carried out before the Department will accept the thesis.

Does the committee find this candidate acceptable for admission to the Ph.D. program? YES   NO

WE RECOMMEND THAT THIS THESIS BE ACCEPTED IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE DEGREE OF MASTER OF SCIENCE. A quorum of three voting members is required.

Committee Chair (print)_________________________ Signature

VOTING MEMBER ONLY IF REQUIRED FOR QUORUM

External Member (print)_________________________ Signature

VOTING MEMBER

Examination Member (print)_______________________ Signature

VOTING MEMBER

Examination Member (print)_______________________ Signature

VOTING MEMBER

Supervisor (print)_____________________________ Signature

NON-VOTING MEMBER

- a member of Departmental Research Grouping
- not a member of the Supervisory Committee

- a member from outside the Department
- not a member of the Supervisory Committee

- a member of the Supervisory Committee

- a member of Departmental Research Grouping
- not a member of the Supervisory Committee

- may be asked to comment before or after the examination