

## PhD Supervisory Committee Approval Form

In order to provide Ph.D. students with additional advisement and mentoring throughout their residency, in addition to what is typically offered by their direct supervisor(s), a *Ph.D. Supervisory Committee* (for short, Supervisory Committee) shall be established for every student. The **committee must be established within the student's first 6 months from the start of their doctoral program.**

The Committee shall consist of

- The supervisor (or supervisors, in case of co-supervision);
- a minimum of two (2) faculty members, other than the supervisors, that are members of Ryerson University's YSGS, with at least one of whom from (and/or with expertise in) the same area of research in which the student will be conducting their research; and at least one YSGS faculty member from within the student's program.
- The *Associate Chair for Graduate Studies* or his/her designate, as the Chair of the Committee.

The Committee is to:

- serve on the Ph.D. Candidacy Examination Committee.
- meet, at a minimum, once per year with the student, to get an update on progress and a summary of a plan going forward while also providing guidance and mentoring;
- submit a yearly report by completing the *Annual Report of the PhD Supervisory Committee* section (the last page) of the *Graduate Student Progress Report*, based on the progress that the student has reported in the aforementioned meeting;
- comprise the internal membership of the student's internal and final doctoral dissertation committees.

<b>Student LAST Name:</b>		<b>Student FIRST Name:</b>	
<b>Supervisor(s):</b>		<b>Student NUMBER:</b>	

**Please list your Supervisory Committee Members:**

	Name (please print)	Department/Organization	Signature
Member 1	_____	_____	_____
Member 2	_____	_____	_____
Member 3	_____	_____	_____
Member 4	_____	_____	_____
Member 5	_____	_____	_____

**Please complete this section for any External Member in the Supervisory Committee (*please print clearly*):**

**Name:** \_\_\_\_\_

**Position:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

Supervisor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Director's signature: \_\_\_\_\_ Date: \_\_\_\_\_