

# THESIS CERTIFICATE OF APPROVAL

Biology Graduate Program

Student

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Name: \_\_\_\_\_ Date: \_\_\_\_\_ MSc  PhD

I submit this thesis draft to Reader/Advisor: \_\_\_\_\_

OR

Two supervisors will read this thesis; please waive the departmental requirement of a reader.

Reader/Advisor (return to student within 2 weeks)

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Approved as it stands

Requires minor revision to  form

content

Requires serious revision to  form

content

Comments:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor(s):

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I hereby approve that the reader/advisor recommendations have been incorporated and the thesis meets the scholarly standards for submission for examination.

Comments:

Signature (supervisor): \_\_\_\_\_ Date: \_\_\_\_\_

Signature (co-supervisor): \_\_\_\_\_ Date: \_\_\_\_\_

NOTE: If the written thesis is not passed at the preliminary evaluation stage by majority of examiners, this form must be completed again by both the supervisor(s) and/or reader accordingly and resubmitted before the revised thesis is uploaded into the thesis repository. If it is determined at the exam that revisions are required to the thesis, only the supervisor must submit this form confirming their approval of the revised thesis and that the examiners' concerns have been addressed.