

NSERC CREATE: M3
THESIS SUPERVISORY TEAM/STUDENT AGREEMENT FORM

Donnelly Centre, 160 College Street, Room 512, Toronto, Ontario M5S 3E1
Email: m3@utoronto.ca

STUDENT INFORMATION

First Name	Last Name	Student Number
Phone Number	Email	Year Entered the Program

SUPERVISOR INFORMATION

First Name	Last Name	Current Position
Organization and Department		
Work Phone	Email	

THESIS COMMITTEE SUPERVISOR INFORMATION

Committee Member 1

First Name	Last Name	Current Position
Organization and Department		
Work Phone	Email	

Committee Member 2

First Name	Last Name	Current Position
Organization and Department		
Work Phone	Email	

Committee Member 3

First Name	Last Name	Current Position
Organization and Department		
Work Phone	Email	

FUNDING DETAILS

Year 1

Departmental

Supervisor

(non-tricouncil funding only)

Hospital

Other

(state source)

Year 2

Departmental

Supervisor

(non-tricouncil funding only)

Hospital

Other

(state source)

THESIS PROJECT DETAILS

Proposed thesis title:

Research question or hypothesis:

AGREEMENT & SIGNATURES

By signing this form, we agree to:

- provide interdisciplinary research mentorship via periodic team meetings
- support the student in fulfilling all M3 program training requirements:
 - * submit an interdisciplinary thesis
 - * complete entrepreneurship 101
 - * complete a communications course
 - * attend a workshop
 - * attend monthly student meetings
 - * complete a 4-6 month internship placement

Signature of Student

Signature of Supervisor 1

Signature of CREATE Leader

Printed Name

Printed Name

Printed Name

Date

Date

Date

Please return completed proposal to

NSERC CREATE in M3 Program Office

University of Toronto

160 College Street, Room 512

Toronto ON M5S 3E1 Canada

Fax to: 416-978-4317

Email: m3@utoronto.ca