

Department of Physiology

REQUEST FOR TRANSFER FROM MSC TO PHD PROGRAM

Student's Name	Student Number
Date and Time of Transfer Exam	Location & Room No.

The Transfer Examination must take place not more than 18 months into the MSc program.

Transfer from the MSc to PhD program will be effective at the next registration date set by the School of Graduate Studies, i.e. September, January, or May.

Eligibility for Transfer

- a substantial amount of data that could be submitted for publication or included in a MSc thesis;
- A- average or better in course work; and
- a clearly identified program for future research.

Attach to this form:

1. A letter from the student explaining the reason for this request.
2. A summary of work accomplished to date (1 – 2 pages).
3. A written outline of the proposed PhD project, including hypothesis, experimental approach and expected results (3 – 5 pages plus figures or tables, as appropriate).
4. A list of publications.
5. A *Supervisory Committee Report* indicating that the Supervisory Committee has met, discussed and approved the request for transfer from MSc to PhD.
6. A letter from the supervisor and the supervisory committee meeting report in support of the request to transfer.
7. A Supervisor's detailed *Current Funding Table* indicating adequate funds are in place for the graduate student(s).

COMPOSITION OF THE TRANSFER EXAMINATION COMMITTEE

Supervisor:	_____	email: _____
Co-Supervisor: (if applicable)	_____	email: _____
Supervisory Committee Member and CHAIR:	_____	email: _____
Supervisory Committee Member:	_____	email: _____
Supervisory Committee Member:	_____	email: _____
Field Expert: (Indicate department if not from PSL)	_____	email: _____
Field Expert: (Indicate department if not from PSL)	_____	email: _____

*Field Experts may be from within or outside the Department. Please provide a brief description of the expertise of these members that would justify their having been selected for this examination committee.

TRANSFER REQUEST APPROVAL: The student may proceed with the transfer examination.

Signature of Graduate Coordinator / Chair	Date
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SUPERVISOR'S CURRENT FUNDING TABLE

Name of PI:		
Name of agency:	Amount granted per annum:	Year-end of grant: