**YEAR X PLAN FOR COMPLETION**

**PATHOLOGY AND LABORATORY MEDICINE**

|  |  |
| --- | --- |
| **Student:** | Click or tap here to enter text. |
| **Date:** | Click or tap here to enter text. |
| **Supervisor:** | Click or tap here to enter text. | **Co-Supervisor:** | Click or tap here to enter text. |

|  |  |
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| **Program start date:**[month, year] | Click or tap here to enter text. |

*Please refer to table below for maximum allowable period as YEAR X, and complete the rest of this form.*

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| --- | --- | --- | --- |
| **Program** | **Funding eligibility**[Faculty and Department] | **Maximum period as year x**[Departmental] | **Maximum registration period**[SGPS regulation 4.03b] |
| Full-time MSc | 2 years | 1 year | 3 years |
| Part-time MSc | N/A | N/A | 4 years |
| Full-time PhD[following completion of Masters-level program] | 4 years | 2 years | 6 years |
| Part-time PhD[following completion of Masters-level program] | N/A | N/A | 8 years |
| Full-time PhD[following completion of an undergraduate-level program] | 5 years | 2 years | 7 years |
| Part-time PhD[following completion of an undergraduate-level program] | N/A | N/A | 10 years |
| Full-time MSc – PhD transfers | 5 years | 2 years | 7 years |
| Part-time MSc – PhD transfers | N/A | N/A | 10 years |

***Year x* status requested for the following terms:**

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| **Term**[Fall, Winter, Summer] | **Year** |
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| **Work remaining to be completed?** | **Date to be completed?**Month and Year |
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| Thesis writing | Click or tap here to enter text. |
| Thesis draft to be submitted to readers/ supervisor(s) for review | Click or tap here to enter text. |
| Names of potential examiners, advisory committee members, tentative thesis title and thesis abstract sent to Graduate Education Committee | Click or tap here to enter text. |
| Submission of [MSc Examination board form](https://grad.uwo.ca/doc/academic_services/thesis/masters_thesis_exam.pdf) or [PhD examination board form](https://grad.uwo.ca/doc/academic_services/thesis/doctoral_thesis_exam.pdf) to Graduate Education Committee | Click or tap here to enter text. |
| Thesis submission | Click or tap here to enter text. |
| Thesis examination*A minimum of 3 weeks after thesis submission* | Click or tap here to enter text. |

**Additional information:**

(check)

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|[ ]  I will be in my first term of Year x (MSc) or first two terms of year x (PhD) and I hope to apply for/secure a teaching assistant (TA).  |
|[ ]  I understand that if I continue to be enrolled full-time as year x, I am expected to work full time towards timely completion of my thesis. |

**ACKNOWLEDGEMENT/ SIGNATURES:**

(Please **type full name** to acknowledge review and agreement)

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| **Student:** | Click or tap here to enter text. |
| **Supervisor:** | Click or tap here to enter text. |
| **Co-supervisor:** | Click or tap here to enter text. |

**Please return completed forms to** **mailto:pathgrad@uwo.ca****.**