

Part B: Statement by Supervisor (or if there is no supervisor, please enter N/A in the box below):

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Date:	Name of Faculty Member:
Supervisor Signature:	

Part C: Statement by Chair/Graduate Advisor/Programme Area Co-Ordinator:

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Date:	Name of Chair:
Chair Signature:	

Once Parts A, B, and C of this form are fully complete, please submit via Service Request "Petition for Special Consideration" - R0005