

PhD in Architecture, Landscape, and Design <u>COMPREHENSIVE EXAMINATION 1 - BOOKING FORM</u>

Section 1: To be fille	<u>d in by the stude</u>	ent:
Student Name:		Student Number:
Primary Supervisor:		Secondary Supervisor (if applicable):
Field of (exam area): _		
Annotated Bibliograph	y :	
Enclosed:	Sent:	Will send:
The annotated bibliogra recommended to submit	phy must be submi t the annotated bib	itted at least 3 weeks before the date of the exam. However, it is liography together with this booking form.
Date of Exam:		Time:
Mode of exam:	Remote or	In person
If in person, please provid	le the room numbe	r: (student must book a small room for 3.5 hours)
		ead and understand the University Policy on <u>Academic Integrity</u> <u>Aatters</u> , and the <u>ALD PhD comprehensive exam instructions</u> .
Student Signature:		
Date:		

NOTE: This form must be submitted at least 3 months prior to the date of the exam. Please submit the completed form via email to <u>researchstream@daniels.utoronto.ca</u>.

UNIVERSITY OF TORONTO JOHN H. DANIELS FACULTY OF ARCHITECTURE, LANDSCAPE, AND DESIGN Office of the Registrar and Student Services 1 Spadina Cres. Toronto, ON M5S 2J5 Canada +1 416 946 3897



Section 2: To be filled in by the Supervisor:

NOTE: Supervisor/s must submit the examination questions <u>at least one week</u> prior to the examination date. Please send the questions to <u>researchstream@daniels.utoronto.ca</u> with the subject line "Student Last name, First name – Comprehensive Exam 1".

SECOND ASSESSOR

- The Supervisor will appoint a second assessor in consultation with the student.
- The second assessor must be part of the SGS graduate faculty and hold a <u>Graduate Faculty</u> <u>Membership</u>.
- It is preferred that the same assessor also be available to serve as part of the exam committee for Comprehensive Exam 2.
- The second assessor may be assigned as part of the student's Supervisory Committee in year 2 of the program after the completion of Comprehensive Exam 2.
- If the second assessor is not a part of UofT, supervisors must arrange for these members to become adjunct faculty members by contacting the Program Director.

Please complete the following:

Second Assessor Name: _____

Second Assessor Email: _____

Is the second assessor a Daniels Faculty Member:

Yes

No If no, please tell us where they are from: ______

I/We have discussed with the student all the preparation necessary to write the comprehensive exam.

Supervisor/s Signature: _____

Date:	



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