Thesis Defense Approval Form SFU School of Mechatronic Systems Engineering

Before booking a room for your undergraduate thesis defense, complete this form and submit it, along with your thesis, to your Academic Supervisor.

Once you have obtained his or her signature and have completed all revisions specified below, submit this form to the Undergraduate Program Assistant in the Mechatronics Systems Engineering office to arrange for a time and room for your defense.

Name:	Student #:			
Thesis Title:				
Committee Members:	Name		norre /Cabaal/Dar	artmant/Othar
			pany/School/Dep	
	Name	Com	pany/School/Dep	artment/Other
	Name	Com	pany/School/Dep	artment/Other
Academic Supervisor:				
Comment upon the readiness of <i>major</i> revisions are required, th Please refer the student to Com Comments:	e student should resu munications Faculty	bmit the the only if lang	esis <i>before</i> you uage is a majo	sign this form).
Signature:		Date:		
Review by Communications H Comments:	• •		□ Yes	□ No
Signature:		Date:		