

MSc Information Systems (IS)

Project

Supervisory Committee Approval Form

Student and Project Information:	
Student Name:	Student ID:
Email:	Signature:
MSc IS Project Title:	Date:
includes the supervisor. If there is supervisor. The supervisor shall b	committee consists of two to four people, which is a sponsor for the project, the sponsor will be the coet the chair of the committee and will normally be a least one of the committee members shall be .
Committee Members' Information a	and Signatures
	I approved the project proposed as named above, and s MSc IS Project Supervisory Committee.
Supervisor	
Name:	
Organization:	
Email:	
Signature:	
Date:	
Sponsor/Co-Supervisor (if applicabl	e)
Name:	
Email:	

	Organization:
	Job Title:
	Signature:
	Date:
Member 1	Name:
	Email:
	Organization:
	Job title:
	Signature:
	Date:
Member 2	(if appliable)
	Name:
	Email:
	Organization:
	Job title:
	Signature:
	Date:
Program D	irector Approval
I agree with	the names as members of the supervisory committee.
MSc IS Pro	gram Director Designate
	Name:
	Signature:
	Date:

The personal information collected on this form is collected under the authority of Section 33(c) of the Alberta Freedom of Information and Protection of Privacy Act. This information will be used by staff of the Faculty of Science and Technology to document Master's Supervisory Committee. If you have any questions about the collection or use of this information, contact the Faculty of Science and Technology at staff grad success@athabascau.ca.