THE UNIVERSITY OF BRITISH COLUMBIA
Michael Smith Laboratories

genome science + technology
GRADUATE PROGRAM

Master's/PhD Supervisor Approval

Student Name: Student Number:

Degree Sought: ☐ MSc ☐ PhD

1)Proposed Supervisor:

Department:

2)Proposed Supervisor:
(Co-Supervisor)

Department:

By signing below, I agree to assume full financial responsibility for this student's minimum take-home stipend in the Genome Science and Technology program at UBC for the duration of their graduate studies, regardless of whether they receive scholarships or awards.

Supervisor(s) Approval:

Signature: Date:

Return the form to Graduate Program Coordinator: gsatgrad@msl.ubc.ca