City Planning Thesis Presentation Booking Form

This form must be completed 10 business days prior to presentation date. Public Notice will be completed based on information provided.

Name: ______________________________ Student Number: _______________________________

E-mail Address: _________________________________________________________________

Presentation Date: _______________ Presentation Time: ________________________

Audio Visual Requirements

Please Check:

☐ Data projector
☐ Screens (depending on room)
☐ Telephone-conferencing required (Dept Head signature required) ______________________________

Note if you are using a Mac you must have an adapter that will allow you to connect to the data projector.

Any other special requirements: _____________________________________________________

Presentation Title: __________________________________________________________________

_________________________________________________________________________________

Committee (please include affiliation)

Advisor / Chair _____________________________________________________________________

Examiner: _________________________________________________________________________

External Examiner: _________________________________________________________________

External Examiner Participation: In Person / Electronically / N/A

Advisor Approval: ___________________________ Date: ___________________________

PLEASE NOTE THAT THE TITLE OF THE THESIS / PRACTICUM MUST BE FINALIZED FOR COMMITTEE SIGN-OFF OF THE MASTER’S THESIS / PRACTICUM FINAL REPORT FORM

Forms should be submitted to Student Services Assistant, Student Services Rm. 201 John A. Russell Building, Faculty of Architecture, University of Manitoba.