

| | and regulations | that apply to all gra | | _ | | | | |
|-----------------|-----------------|-----------------------|--------------|-----|-----|------|---------|-----|
| Student name: | | | | | | | | |
| Student ID: | | | Degree: | MA | MSc | MASc | MFA | PhD |
| Field of Study: | | | Entry point: | SEP | JAN | MAY | Year: _ | |

Program Description and Requirements:

1) Attach a 2-3 page description of the academic program and research objectives. Describe how the proposed courses will support the research and how your background has prepared you for this program. Indicate what department will house the program and why a regularly offered graduate program is not appropriate for this research or area of study.

| 2) Language req | uirement: Y | res | No | If required, specify language: | | |
|--|-------------|------|------|---|----------|--------------------------------|
| 3) Candidacy examination (doctoral programs only): Select from the options below | | | | | | |
| Format of Exam: | Written | Oral | Both | Deadline for Advancement to Candidacy: 36 | 6 months | Other, include rationale below |

4) **Required courses in program**: List the department, course number, and title of each required course below. Refer to the <u>graduate</u> <u>academic calendar</u> for regulations pertaining to course credit, transfer credit, registering in courses at another institution, and registering in courses at the undergraduate level.

Master's programs must consist of a minimum of 15 units (with at least 12 units at the graduate level). **Doctoral programs** must consist of a minimum of 30 units for students who hold a master's degree and 45 units for students who do not yet hold a master's degree. No more than 3 units of work at the senior undergraduate level may be taken toward the doctoral program.

Approval by email or memo must accompany this form if this proposed program includes courses outside the home academic unit. This approval should be granted by the course instructor, if known, or by the chair or director of the department offering the course.

Courses numbered at the 100 or 200 level may be included in the program as prerequisites but will be indicated on the student's record as FNC (for no credit) or AUD (audit) and must be identified as such below.

| Department & course number | Course title | Unit value | Institution (if not UVic) |
|-------------------------------|---|------------|---------------------------|
| e.g., PSYC 500 | Advanced Statistics for the Social Sciences | 1.5 | University of Toronto |
| e.g., Electives | To be determined by Supervisor | 4.5 | |
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Total program units:_____

Supervisory Committee:

<u>Master's programs</u> - The committee shall consist of at least two members of the Faculty of Graduate Studies including the academic supervisor. At least one member must be from a department with a regular master's program and one member must have supervised successful candidates for graduate degrees.

Doctoral programs - The committee shall consist of at least three members of the Faculty of Graduate Studies including the academic supervisor. One member must be from a department with an active regular PhD program. At least one member must have supervised a successful PhD candidate.

Signatures indicate approval of the program described above and a commitment to serve on this committee upon admission of the aforementioned student.

| Supervisor | Signature | Department | Date |
|-------------------------|-----------|------------|------|
| Co-Supervisor or Member | Signature | Department | Date |
| Member | Signature | Department | Date |
| Additional Member(s) | Signature | Department | Date |
| Additional Member(s) | Signature | Department | Date |

Acknowledgment:

I agree to the structure and composition of this program and understand that all other regulations and requirements laid out in the <u>calendar</u> apply to this program.

Student Signature

The department will provide the student with access to services and facilities normally available to students enrolled in graduate programs in that department. On behalf of the department, the undersigned agrees to this arrangement.

Date

| Graduate Adviser | Signature | Department | Date |
|-------------------|-----------|------------|------|
| Chair or Director | Signature | Department | Date |

A copy of this form must be submitted by the student as part of their application for admission to the program (www.uvic.ca/application).

Changes to this program after the student has been admitted must be made by submitting the <u>SPARR program change</u> form by email to the Graduate Admissions and Records Office.

The University of Victoria will be collecting your personal information for the purposes of providing educational services. This information is collected under s. 26(c) of the *Freedom of Information and Protection of Privacy Act*. If you have any questions or concerns about how your personal information is handled please contact privacyinfo@uvic.ca.