Graduate Student Program Form Department of Linguistics

M.A. In Linguistics Note: This form must be submitted to the graduate advisor (i) each year by September 30, (ii) when the thesis proposal is approved by the supervisory committee, and (iii) when any changes in the program or supervisory committee occur. Name _____ E-mail Reg. No. _____ Telephone _____ Funding provided by supervisor (current year) _____ SUPERVISORY COMMITTEE (Note: When the thesis proposal has been approved, the committee members must sign in the spaces provided below. At other times, please print their names.) Supervisor Committee member Signature Additional Member (not required) Signature THESIS TITLE OR TOPIC THESIS PROPOSAL APPROVED BY SUPERVISORY COMMITTEE 1. Has your thesis/dissertation proposal been approved by your supervisory committee? Yes _____ No____ 2. If Yes, the date of the approval or thesis proposal defense _____ 3. Does your thesis/dissertation involve human subjects? Yes _____ No_____ (Note: If Yes, a "Request for Ethical Review" form must be completed and submitted to the Human

LANGUAGE REQUIREMENT

Research Ethics Committee for approval)

- 1. Has your language requirement been satisfied? Yes _____ No____
- 2. If No, when do you intend to satisfy it? _____
- 3. And how do you intend to satisfy it? _____

(Note: Refer to the <u>Uvic Calendar for ways to satisfy your language requirement.</u>)

4. Has your "Request for Ethical Review" application been approved? Yes ______ No_____5. If Yes, the date and number of the approval Date ______ Number _____

PROGRAM UNDERGRADUATE COUI	RSE (EXTRA-TO PROGRAM, IF APPLICA	BLE)
Course & units	Intended completion date	Actual completion date
PROGRAM COURSES (a	minimum of 7.5 units of coursew	ork plus 7.5 units of Ling 599 Thesis)
1. Core graduate	e courses: two core graduate cou	urses (3.0 units)
Course & units	Intended completion date	Actual completion date
Two of:		
Ling 503 or 508 (1.5)		
Ling 504 (1.5)		
2. At least three	e course (4.5 units) of other grad	uate LING courses
Course & units	Intended completion date	Actual completion date
3. Ling 599 Thes	iis: <u>7.5 units</u>	
Total Program Cou	rse Units (items 1-3 above):	units (a minimum of 15 units)

COLLOQUIUM/PRESENTATION REQUIREMENT

Title of presentation	Venue	Date
		<u></u>
Student's Signature	Date	
Supervisor's Signature	Date	
Graduate Advisor's Signature	Date	