

The approvals process for Graduate Supervision by Retirees

The Dean of the School of Graduate Studies has been authorized since 1979 to grant permission to retired faculty members to supervisor graduate students.

As stated in the Policy on Relations of Retired Faculty Members with the University, when a faculty member retires (either through early or mandatory retirement) and subsequently wishes to supervise graduate students (Master's and Ph.D.), that individual shall submit an application form for each new supervision proposed. A full c.v. is not required; one page which lists recent major publications, conference presentations, and honours is sufficient. The faculty member and the chair of the department will be notified of the decision by the Dean of Graduate Studies.

Name of Faculty Member:

Information about the student

Name of Graduate Student:

Student I.D:

(Please check the appropriate boxes)

Masters

Ph.D.

Full-Time

Part-Time

Department:

Date entered (or entering) the program (YYYY/MM/DD):

Anticipated date of completion (YYYY/MM/DD):

Means of fulfilling the university's responsibilities to this student

1. Who will replace you as primary supervisor if you are unable or decline to continue with the supervision?
Please provide a letter of confirmation from that person

Replacements full name:

Dept. mailing address:

Email address:

2. What arrangements will you make for supervision and consultation if you are away from campus for more than four consecutive weeks?

3. If the student is full-time, what will be the source of the money for the student's scholarship?

4. What are the anticipated costs for the student's research, and how will they be funded?

Rationale for taking on this student

5. Briefly describe your post-retirement research plans and how this graduate student fits into them.

6. Please attach a one-page list of recent publications and/or conference presentations, grants or contact currently held or applied for, and the names and status of other students currently being supervised.

Signature of Retired Faculty:

Date:

Chair of Department

Approve

Do Not Approve

Signature:

Date:

Dean of Faculty

Approve

Do Not Approve

Signature:

Date:

Dean of Graduate Studies

Approve

Do Not Approve

Signature:

Date: