| Name | |
|---|---|
| Address | |
| Telephone | |

Education (list all previous degrees completed)

| University | Degree | Year Obtained | Field of Specialization |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |

Relevant Professional Experience (summarize all work experience relevant to your proposed program)

| Category of Graduate Student | Provisional | | Regular | |
|---|---|---|---|---|
| Classification of Graduate Student | Full-time | | Part-time | |
| Host Department | | | | |

| Area of Specialization[1] | |
|---|---|

Supervisory Committee
(consists of a minimum of **4** graduate faculty, at least <u>one of these 4</u> must be from a Department other than that in which the student is registered) A list of graduate faculty can be found in the Graduate Faculty folder on the g drive.  Graduate Faculty from other faculties can be found on the website under the UPEI Calendar.

| | Name and Department | Please Indicate if Graduate Faculty Status is "Appointed" | Please Indicate if Graduate Faculty Status is "Pending" |
|---|---|---|---|
| (Chair) | | | |
| (Supervisor/Co-Supervisors) | | | |
| (member) | | | |
| (member) | | | |
| (member) | | | |

Funding

    a) Research Operating Support

| Source | Start Date | End Date | Amount |
|---|---|---|---|
| | | | |
| | | | |

    b) Graduate Student Personal Support

| Source | Start Date | End Date | Amount |
|---|---|---|---|
| | | | |
| | | | |

Comments on funding arrangements:

Title and Brief Description (~100 words) of Research Project

| Proposed Graduate Courses (must include at least 4 substantive courses) All students are expected to complete VHM 801 (Veterinary Biostatistics) unless comparable training has been completed prior to entry into the program. The Graduate Studies and Research Committee may approve a justified reduction in the requirement of four substantive courses, twelve total credits, or both. If the proposed courses listed below total less than 12 credits, please indicate that a reduction is requested and justify the reduction. |||||

| Course # | Course Name | Credits | Expected Completion Date (month/year) | Institution |
|---|---|---|---|---|
| VHM 8010 | Veterinary Biostatistics | 3 | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

**Compulsory Workshops (CCAC, Library Resources, Biohazard Safety, WHMIS)**
If your Supervisor/Supervisory Committee agrees that one or more of the workshops listed above is not required as part of your program, please indicate this in the space below:

Anticipated date of Final Examination
x

Signatures

Student                                          Program Supervisor

Department Chair                                 Date

**FACULTY OF VETERINARY MEDICINE MSc**
The graduate students will register in one of the four academic departments listed below and in one of the designated areas of specialization:

[1]**Department of Biomedical Sciences**
Animal Behaviour
Physiology, Pharmacology and Toxicology
Cell and Molecular Biology
Neuroscience
Endocrinology

**Department of Companion Animals**
Anesthesiology
Cardiology
Diagnostic Imaging
Small Animal Medicine
Small Animal Surgery

**Department of Health Management**
Epidemiology/Health Management
Animal Science and Animal Nutrition
Clinical Sciences
Aquatic Animal Health
Animal Welfare
Biostatistics
Public Health

**Department of Pathology and Microbiology**
Morphologic Pathology          Immunology
Wildlife Pathology             Aquatic Animal Health
Clinical Pathology             Biosecurity
Parasitology
Virology
Bacteriology
Public Health