

Department of Italian Studies

Supervisory Form

Name _____ Student Number _____

I have asked these three people to be on my supervisory committee, and they have agreed.

Student's Signature _____ Date _____

Only the supervisor's signature is required, unless you have both a supervisor and a co-supervisor. A co-supervisor signs as committee member A.

Supervisor's Name _____ Email _____

I certify that the members listed here have agreed to serve on this student's supervisory committee.

Supervisor's Signature _____ Date _____

Supervisory Committee Member (A): _____ Department _____

Is this person your Co-Supervisor? Y / N Email _____

Yes only: Co-Supervisor's Signature _____ Date _____

Supervisory Committee Member (B): _____ Department _____

Email _____

Graduate Coordinator's Signature: _____ Date: _____

Admin: Date Received _____

Library Requirements:

Will this dissertation require access to materials not available at the University of Toronto or through interlibrary loan? If so, where are the material located?

How much time will likely be involved in working with other archives and collections?

Language Requirements:

In what language do you plan to write your thesis?

Are any languages other than English and Italian are REQUIRED for your research?

What is your competence in these languages? If necessary, indicate how you plan to attain the required levels of proficiency?