



## MSc/MASc THESIS GRADE

(This form is to be submitted by the Academic Supervisor to the Graduate Program Chair)

**Student Name:**

**Student Number:**

**Degree:**(MSc, MASc):

**Program:**(Physics, Astronomy, Medical Physics, Engineering Physics)

### EXAMINING COMMITTEE

**Supervisor:**

**Second Reader:**

### EXAMINATION RESULT

Thesis is approved for submission to Graduate Studies

Student has given a public presentation of his/her research:

**Presentation title:**

**Date and venue:**

### THESIS GRADE

Grade (%):

Grade is required for internal department use only—it will not appear on the student's transcript. Grades below 72% indicate unsatisfactory performance. Please reserve grades above 90% for exceptional theses.

**Supervisor**

Signature

Name (Please Print):

Date (yyyy/mm/dd)

**Second Reader**

Signature

Name (Please Print):

Date (yyyy/mm/dd)

Coursework requirements for the MSc or MASc degree have been met.

Please see the requirements for each program at:

<https://phas.ubc.ca/graduate-program-academic-programs>

**Graduate Advisor**

Signature

Name (Please Print):

Date (yyyy/mm/dd)