



RESEARCH SUPERVISOR FOR NEW GRADUATE STUDENTS

(This form is to be submitted by the student when a research supervisor is chosen)

Masters students: here is your chance to explore your interests, tour facilities, and decide what you passionately want to do with your few years of study at UBC. Interview potential supervisors, then choose a supervisor who suits your research interests and work style. Please see the Physics and Astronomy departmental research web pages at www.phas.ubc.ca for information on opportunities and decide with whom you may be interested in working. Most students will interview 10-20 prospective supervisors before making a decision. For more information and advice please refer to the web sites below. If you need help please visit or email the Graduate Advisor.

<http://www.phas.ubc.ca/graduate/supervisor.php>

<http://www.grad.ubc.ca/current-students/supervision-advising/research-supervisor>

Return your signed form to the Graduate Program Coordinator, Room 333, as soon as you've found a supervisor. Please note that your RA pay after the 4 month period will come from your supervisor, so you must be working with one before the end of the period.

PhD students: You have already been assigned a research supervisor. Please complete and return the form at your earliest convenience. If your research supervisor is not a member of the Faculty of Graduate Studies, you will also need an Academic Co-supervisor. Please contact the Graduate Advisor for more information.

STUDENT INFORMATION (to be completed by the student)

Student Name:	Student Number:
Current Address:	
Email Address:	Phone:
Previous Universities:	Degrees Obtained:
Degree Sought at UBC:	Discipline:
Scholarships Currently Held:	
Research Supervisor Name:	
Academic Co-supervisor Name (if required):	

SUPERVISOR (to be completed by the Research Supervisor)

RA Pay Rate:	<input type="checkbox"/> current baseline amount (see www.phas.ubc.ca/graduate/support.php)	Speed Chart _____
or	<input type="checkbox"/> \$ _____ (must not be less than baseline amount)	
Comments (if any):		

SIGNATURES

Student: _____	Date: _____
Research Supervisor: _____	Date: _____
Co-Supervisor (if applicable): _____	Date: _____
Graduate Program Chair: _____	Date: _____