NUTR 701 Enrollment Form

(NUTR 701 Form 1)

Form version: 202305

Student Name:	
McGill ID:	
Email:	
Primary advisor:	
Name:	Email:
Co-advisor: (if applicable)	
Name:	Email:
Advisory committee members:	
Name:	Email:
Name:	Email:
Additional advisory committee members (if appl	icable):
Name:	Email:
Name:	Email:
Name:	Email:
STUDENT'S DECLARATIONS	
I am in PhD-3.	
I have read and understand the School's Ph.D. Comprehensive Exam guidelines.	
I have read and understand McGill University's Ph.D. Comprehensives Exam Policy.	
I have read and understand McGill University's Policy on Academic Integrity and Plagiarism.	
I am not in a conflict of interest with my NUTR 701 Doctoral Examination Committee as defined	
in the McGill University Regulation on Co	onflict of Interest.
I am ready and prepared to undertake the Ph.D. Comprehensives Exam.	
WHEN ALL THE BOXES ABOVE ARE CHECKED, SIGN THE DOCUMENT WITH YOUR DIGITAL SIGNATURE AND	
THEN UPLOAD THE COMPLETED FORM TO THE NUTR 701 SECTION OF myCOURSES.	
Signature:	