

UNIVERSITY OF TORONTO MISSISSAUGA
Chemical and Physical Sciences
APPLICATION FOR ADMISSION TO
ERS470Y5 Research Thesis

Please fill in session year (eg. 2015) in which you will register. (Sessions: Summer; Fall-and-Winter)	Fall	Winter	Summer

Please return to: Roxana Moreira-Diaz (Room DV4059B).

SURNAME GIVEN NAME AND INITIALS (print clearly)																	

STUDENT NUMBER (print clearly)									

E-mail address: (must be valid UTOR email, checked directly and frequently)
@mail.utoronto.ca
@utoronto.ca

Telephone Number - Home:	
Telephone Number - Cell	

Academic Program

- NOTES: 1. For course description, pre-requisites and other requirements, refer to the Academic Calendar.
 2. Separate ballots are required for each course listed in the calendar. You must seek an interview with an Earth Science Faculty member who would become your course supervisor for this course.
 3. If you would prefer to carry out your 4th year research at the St. George campus a different application form is required which should be obtained from the St. George Campus Department of Geology.

Please indicate below the name of the faculty with whom you would prefer to study and indicate your order of preference if you are interested in more than one.

Program (to which this course will apply)

1	2	3

Date:		Student's Signature:	
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For Office Use Only				
Approved (check one)		Coordinator signature	Date	Supervisor signature
YES:	NO:			