

## PROGRAM APPROVAL FORM

### MASTER OF SCIENCE IN MATHEMATICS

#### STUDENT INFORMATION

Student ID: \_\_\_\_\_ First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Email: \_\_\_\_\_@unbc.ca Admit Date: \_\_\_\_\_ Status: ☐ Full-time ☐ Part-time

#### COURSE INFORMATION

Complete the program of study below. A maximum of 6 credit hours from independent studies can be counted towards the elective requirement. Project students in Physics or a combination of study areas including Physics are expected to take PHYS 710 (3) as one of their electives. Degree requirements are outlined in the [Graduate Calendar online](#).

	Course #	Title	Credits
<b>Seminar:</b>	1.5 credits, taken twice - choose from BCMB 704, CHEM 714, CPSC 704, MATH 704, MCPM 704		
			3
<b>Select One:</b>	<input type="checkbox"/> <b>Project</b> MATH 793/ STAT 793 MSc Project <u>OR</u>		6
	<input type="checkbox"/> <b>Thesis</b> MATH 794/ STAT 794 MSc Thesis		12
<b>Electives</b> (Choose <b>12 credit hours for the thesis</b> path <u>OR</u> <b>18 credit hours for the project</b> path):			
<b>Total Credits</b> (27 credits required):			

Additional required courses or changes to the program of study (supplemental information may be attached if needed):

#### APPROVAL SIGNATURES

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Co-Supervisor Name** (if any): \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Program Chair:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**OGP USE ONLY** Dean's review required? No Yes - date submitted for review: \_\_\_\_\_ Initials: \_\_\_\_\_

**DEAN'S DECISION** ☐ Approved ☐ Additional information required ☐ Denied

**Print Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_