

THESIS CO-SUPERVISION
TECHNICAL FORM

Last name:		First name:		ID:
Date and place of birth:			Nationality:	
<p>_____</p> <p>(Institution Name)</p>			Polytechnique Montréal	
Previous diploma at the time of the admission for the doctoral program				

THESIS CO-SUPERVISION		
Identification of partner institutions		Polytechnique Montréal P.O. Box 6079, Station Centre-ville Montreal, Quebec H3C 3A7 Canada Telephone : (514) 340-4713 Fax : (514) 340-5859
Coordinator of Academic Affairs (or equivalent)	<p>_____</p> <p>(Institution Name)</p>	Polytechnique Montréal ACADEMIC AND RESEARCH DIRECTORATE Polytechnique Montréal P.O. Box 6079, Station Centre-ville Montreal, Quebec H3C 3A7 Canada Telephone : (514) 340-4713 Fax : (514) 340-5859 Email : etudes.superieures@polymtl.ca
Thesis supervisor: Contact information: (address, phone number, fax number, email address)	<p>_____</p> <p>(Name of Thesis Supervisor)</p>	<p>_____</p> <p>(Name of Thesis Supervisor)</p>
	Percentage of supervision:	Percentage of supervision: 50%
Thesis subject (description)		
Institution where the project emanate (check the concerned institution)	<p>_____ <input type="checkbox"/></p> <p>(Institution Name)</p>	Polytechnique Montréal <input type="checkbox"/>

STUDY PLAN (Academic activities and alternative periods of stay in each institution)		
Courses (ID, title, semester or trimester) MC = mandatory courses EC = external courses	(Institution Name)	Polytechnique Montréal
General pre-doctoral exam		Expected trimester for the writing part of the pre-doctoral exam: _____ Expected trimester for the oral part of the pre-doctoral exam: _____
Period of stay in each institution		

THESIS DEFENSE	
<p>The authorization for the thesis defense will be provided only when the appropriate requirements in both institutions will be fulfilled or when there were a specific agreement between the two institutions. The thesis defense is public, unless agreed otherwise by both institutions.</p> <p>Nomination of a single jury:</p> <p>The jury of the thesis defense is designated according to the rules of each institution and is composed of:</p> <ul style="list-style-type: none"> ➤ both thesis supervisors and three or four additional members; ➤ at least one external member of the Polytechnique Montréal; ➤ half the members have to represent each of the two countries; ➤ the thesis supervisor cannot be selected as president; ➤ the president of the jury must be a professor of the Polytechnique Montréal or a professor of an equivalent rank; ➤ there is a representative of the Dean of graduate studies of the Polytechnique Montréal, if it applies. 	
Location of the thesis defense:	
Date of the thesis defense:	
Written language of the thesis:	
Language used for the thesis defense:	

GRADUATION		
Proposed wording of the degrees prepared in thesis co-supervision	(Institution Name)	Polytechnique Montréal

FUNDING		
	(Institution Name)	Polytechnique Montréal
Total amount of tuition fees:		
Total amount of financial support:		
Total amount of expected external funding:		
Funding terms:		

OBSERVATIONS OR PARTICULAR CONDITIONS

THESIS CO-SUPERVISION APPROVAL	
(Institution Name)	Polytechnique Montréal
<p>Student</p> <p>_____</p> <p style="text-align: center;"><i>Name in block capitals</i></p>	
_____	_____
Signature	Date
<p>Thesis supervisor</p> <p>_____</p> <p style="text-align: center;"><i>Name in block capitals</i></p>	<p>Thesis supervisor</p> <p>_____</p> <p style="text-align: center;"><i>Name in block capitals</i></p>
_____	_____
Signature - Date	Signature - Date

APPROVALS	
_____	_____
Director of Graduate Studies	Date