

THESIS CO-SUPERVISION TECHNICAL FORM

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

| 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) | _____ (Institution Name) | Polytechnique Montréal Direction des affaires académiques et de l'expérience étudiante Graduate Studies Polytechnique Montréal P.O. Box 6079, Station Centre-ville Montreal, Quebec H3C 3A7 Canada Telephone : (514) 340-4713 Email : etudes.superieures@polymtl.ca |
| Thesis supervisor: Contact information: (address, phone number, fax number, email address) | _____ (Name of Thesis Supervisor) | _____ (Name of Thesis Supervisor) |
| Thesis subject (description) | Percentage of supervision: | |
| Institution where the project emanate (check the concerned institution) | _____ <input type="checkbox"/> (Institution Name) | 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) | <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: center;">Polytechnique Montréal</th> </tr> <tr> <th style="width: 30%;">Course name</th> <th style="width: 30%;">Trimester</th> <th style="width: 40%;">OBL (Mandatory) HP (Out of program)</th> </tr> </thead> <tbody> <tr><td>SST6000</td><td></td><td>OBL</td></tr> <tr><td>CAP7003</td><td></td><td>OBL</td></tr> <tr><td>CAP7005</td><td></td><td>OBL</td></tr> <tr><td>CAP7011</td><td></td><td>OBL</td></tr> <tr><td>CAP7015</td><td></td><td>OBL</td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table> | Polytechnique Montréal | | | Course name | Trimester | OBL (Mandatory) HP (Out of program) | SST6000 | | OBL | CAP7003 | | OBL | CAP7005 | | OBL | CAP7011 | | OBL | CAP7015 | | OBL | | | | | | | | | | | | | | | | | | | | | |
| Polytechnique Montréal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Course name | Trimester | OBL (Mandatory) HP (Out of program) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SST6000 | | OBL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CAP7003 | | OBL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CAP7005 | | OBL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CAP7011 | | OBL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CAP7015 | | OBL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 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 | | Please note: At Polytechnique Montréal, payment is made by term, so plan your stay accordingly. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Insurances | | It is compulsory to be covered by the insurance issued by the university where the international student is registered. For Polytechnique Montréal, please refer to the insurance policy in force. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| THESIS DEFENSE | |
|--|--|
| 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. | |
| Nomination of a single jury: The jury of the thesis defense is designated according to the rules of each institution and is composed of: <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 | | |
|---|--------------------|------------------------|
| Total amount of study and research grants including other expenses : Funding terms: | (Institution Name) | Polytechnique Montréal |

| OBSERVATIONS OR PARTICULAR CONDITIONS |
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| THESIS CO-SUPERVISION APPROVAL | |
|---------------------------------------|------------------------|
| (Institution Name) | Polytechnique Montréal |
| Student | |
| _____ | |
| <i>Name in block capitals</i> | |
| _____ | _____ |
| Signature | Date |
| Thesis supervisor | |
| _____ | |
| <i>Name in block capitals</i> | |
| _____ | _____ |
| Signature - Date | Signature - Date |

| APPROVALS | |
|------------------------------|-------|
| _____ | _____ |
| Director of Graduate Studies | Date |