



**Faculty of Engineering & Architectural Science  
Graduate Program in Mechanical and Industrial  
Engineering**

**Add Co-Supervisor Request Form**

Student's Name:	Student ID:
Degree Program:	Full-Time                      Part-Time
First Term of Studies:	Area of Specialization:
Current Supervisor:	

**New Co-Supervisor Information:**

Name:	Department:
University:	Organization (if applicable):
The term you wish this change request to be effective:	

**Approval:**

Student Signature:	Date:
New Co-Supervisor's Signature:	Date:
Current Supervisor's Signature: Approve                      Deny	Date:
Associate Chair, Graduate Program: Approve                      Deny	Date:

**Notification**

- Student
- Current Supervisor
- New Supervisor / New Co-Supervisor
- Associate Chair, Graduate Studies