# NOTIFICATION OF COMPLETION of HRM MSC REQUIREMENTS

Course-Based Option

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| **Student’s Name:**  | **ID#:** |

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| **Topic of Scholarly Paper:**  |
| **Date Scholarly Paper requirement completed:** |

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| COURSES COMPLETED: | **Course Type**M / D / EC**(M – MSc D – Doctoral EC- Extra Course)** |
| **SGS 101** |   |
| **SGS 201** |  |
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Date of Internship requirement completion:

Date of completion of requirements for Course-Based MSc:

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| **Assistant Dean, HRM***(signature)***:** | **Date:** |
| **Student** *(signature)***:** | **Date:** |

Please return this form to Office of the Associate Dean of Graduate Studies (Health Sciences) in HSC-4H4. A copy should also be retained by the Assistant Dean, HRM in HSC 2C5B.