

*THIS FORM MUST BE COMPLETED AND RETURNED TO
THE GRADUATE SEMINAR COORDINATOR (EDINA SANDLER)*

*AT LEAST 2 WEEKS PRIOR TO THE SCHEDULED PRESENTATION
BEFORE A STUDENT WILL BE PERMITTED TO PRESENT IN THE GRADUATE SEMINAR SERIES*

PRESENTATION APPROVAL FORM

**SCHOOL OF COMPUTER SCIENCE
CARLETON UNIVERSITY**

Student #: _____

Student's Name _____
PLEASE PRINT

Student's Email _____
PLEASE PRINT

Signature of Student: _____

Date reserved for presentation: _____

Supervisor's Name _____
PLEASE PRINT

Supervisor's Signature _____

By signing this form, the student and the supervisor attest that they have reviewed the slides to be used by the student for presentation in the OCICS graduate seminar series and that they believe these slides to meet OCICS standards for both form and content.

Date: