
If you wish to have your Thesis or Design Project count toward your electives for your minor, you must obtain approval. To obtain approval, please complete the following:

1. Provide your personal information.
2. Attach a one-page description of your project or research. This must justify how the work you will be undertaking relates to your minor of choice. Generic department/course descriptions are unacceptable.
3. Obtain your supervisor’s signature and submit your completed form and attached description to Sharon Brown at the Cross-Disciplinary Programs Office (44 St. George Street; 1st floor of Bahen House) by September 29, 2017.

For more information, please contact Sharon at 416-978-3532 or cdp@ecf.utoronto.ca

Following completion of your final report, you must provide a one-page summary of your results. If this is a group project, a 2nd page with the individual work breakdown will be required. Approval at this time is conditional on your final submission to us.

This form does NOT replace any documentation required by your home program.

1. Personal Information

Please indicate your minor: □ Bioengineering     □ Engineering Business     □ Robotics and Mechatronics
□ Environmental Engineering     □ Sustainable Energy     □ Nanoengineering

Name of Student ___________________________ Student Number ___________________________ Phone Number ( ) ________

Email Address ___________________________ Program ___________________________ Course Code ___________________________

2. Attach Description

Thesis/Design Title and Project Number (if applicable)

Is this a group project? □ Yes     □ No  
If yes, how many members are in the group? __________

I verify that the attached description accurately describes the work I intend to undertake for this course.

Student Signature ___________________________ Date __________

3. Supervisor Signature

Name of Supervisor ___________________________ Supervisor’s Email Address ___________________________

I agree to supervise this student’s work on the specified topic: □ Yes     □ No

Supervisor’s Signature ___________________________ Date __________

For Internal Use Only

Director Signature ___________________________ Date __________