

MIE498 Thesis Enrollment Form

Faculty of Applied Science and Engineering – Department of Mechanical and Industrial Engineering

RETURN FORM TO: MIE Undergraduate Office, Department of Mechanical and Industrial Engineering, MC109.

Enrollment Procedure:

- Contact MIE faculty members whom you are interested in working with: <http://www.mie.utoronto.ca/faculty/>
- Once you have found a faculty member who will supervise you, submit this **thesis enrollment form** to the MIE Undergraduate Office. **Ensure that your supervisor signs the form.**
- Attach a 1-page outline of the project you plan to undertake including: thesis title, objectives, description of activities & evaluation breakdown.
- Return the form to the MIE Undergraduate Office Department **5 business days prior the last day to add courses.**
- If approved, your research thesis will be added to your record on ACORN by the MIE UG Office. If it is not approved, we will notify you and your supervisor by email.

FIRST NAME: _____ LAST NAME: _____

EMAIL: _____ PHONE NUMBER: _____

STUDENT NUMBER: _____ PROGRAM: Mechanical Industrial

Do you have a thesis partner? No Yes, his/her name is _____

COURSE NUMBER (Please check only one box)

MIE498H1F (September – December) MIE498H1S (January – April) MIE498H1Y (September – April)

Approval to register for a fourth-year thesis course must be obtained from the MIE Undergraduate Office (MC109) and is **restricted to students with an overall CGPA of 2.7 or above.**

By checking this box, I confirm that I meet the minimum 2.7 CGPA requirement

Please note that students who do not meet the CGPA requirement will not be permitted to enrol in MIE498 - Research Thesis. For further inquiries, students may contact the MIE UG Office.

THESIS SUPERVISOR: _____ EMAIL: _____

Proposed Thesis Topic: _____

*Note: Applicants MUST attach a proposal (approximately 1 page in length).

Supervisor Confirmation

Supervisor's Name (*please print*): _____

Supervisor's Signature: _____ Date: _____

Student Signature: _____ Date: _____

For Office Usage:

Approval: _____ Date: _____

Course entered into ROSI

The University of Toronto respects your privacy. The information on this form is collected to pursuant section 2(14) of the University of Toronto Act, 1971. It is collected for the purpose of administering admission, registration, academic programs, university-related student activities, activities of student societies, financial assistance and awards, graduation and university advancement, and for the purpose of statistical reporting to government agencies. At all times it will be protected in accordance with the Freedom of Information and Protection of Privacy Act. If you have any questions, please refer to www.utoronto.ca/privacy or contact the University's Freedom of Information and Protection of Privacy Office; room 201, McMurrich Bldg., 12 Queen's Park Crescent, Toronto, On M5S 1A1, Tel: 416-946-5835