

Form TD1: Thesis/Dissertation Research Submission

(Please print clearly or type)

Students must complete the top portion of this form and deliver it along with copies of completed appropriate documents (as indicated below) to their program office.



Student _____ ID# _____

Program _____ Degree _____ Date _____

Title of Research Proposal _____

Type of research	Documents to submit
Please check one:	Program will forward the following to the Office of the Dean, Graduate Studies, 230 York Lanes
<input type="checkbox"/> No human participants →	<input type="checkbox"/> TD1 form <input type="checkbox"/> Proposal <input type="checkbox"/> TD 4 form (if involves animals or biohazards) + HPRC Approval Certificate
<input type="checkbox"/> Human participants, minimum risk, with written consent → <input type="checkbox"/> Human participants, minimum risk, with verbal consent	<input type="checkbox"/> TD1 form <input type="checkbox"/> Proposal <input type="checkbox"/> TD2 form (original + 1 copy) <input type="checkbox"/> Informed consent documents (written or verbal script) (original + 1 copy) <input type="checkbox"/> TD3 form <input type="checkbox"/> TCPS Tutorial Certificate dated within last 2 years
<input type="checkbox"/> Human participants, funded by faculty research grant →	<input type="checkbox"/> TD1 form <input type="checkbox"/> TD4 form + HPRC Approval Certificate <input type="checkbox"/> Proposal <input type="checkbox"/> TCPS Tutorial Certificate dated within last 2 years
<input type="checkbox"/> High risk or funded →	<input type="checkbox"/> TD1 form <input type="checkbox"/> Proposal <input type="checkbox"/> Completed appropriate HPRC package plus 6 copies (submit to FGS for forwarding to HPRC) <input type="checkbox"/> TCPS Tutorial Certificate dated within last 2 years

TD1 = Thesis/Dissertation Research Submission Form

TD2 = York University Graduate Student Human Participants Research Protocol Form

TD3 = Informed Consent Document Checklist

TD4 = Statement of Relationship between Proposal and an Existing HPRC Approved Project

Graduate Program Director Recommendation:

I recommend to the Faculty of Graduate Studies approval of the proposal for the above student. The Supervisory Committee has reviewed the Research Proposal and has recommended it be submitted for approval.

Supervisory Committee (Please print/type) (If additional members are on the committee, please attach listing)	Member of York Graduate Program in (list program relevant to this supervision; See FGS Appointment list www.yorku.ca/grads/fmr.htm)	Date	Supervisory Committee Approval (Please sign or attach e-mail indicating approval of proposal)
Supervisor:			
Member:			
Member:			
Member:			

☐ A TCPS tutorial certificate dated within the past 2 years must be attached.

Graduate Program Director Signature _____

Date _____

Associate Dean, FGS Signature _____

Date _____