



# WYCLIFFE COLLEGE

## BASIC DEGREE SUMMATIVE EXERCISE/THESIS REGISTRATION

<b>STUDENT SURNAME</b>
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<b>STUDENT FIRST NAME</b>
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<b>STUDENT NUMBER:</b>									
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<b>SESSION:</b>									
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2000-5 (Summer 2000)  
2000-9 (Sept 2000)  
2001-1 (Jan 2001)

<b>STUDENT'S PROGRAM (Circle One)</b>
MDiv MRel MTS

	Level* (Circle one)	Weight	Session (Circle one)	Professor's College (Circle one)	Professor's Department (Circle one)
TSX	3333 3336 3337	Y	F S Y	CG EM IS KN RG SA SM TR TS WY	B H P T

<b>Supervisor:</b>	
<b>Second Reader</b> (Applies to MTS and MRel Thesis only)	
<b>Title</b> (e.g. MTS Summative Exercise)	
<b>Description:</b>	
<b>Requirements:</b>	

Student's Signature:		Date:	
Professor's Signature:		Date:	
College Registrar's Signature:		Date:	

**Distribution:**                  Student File                  Student                  Professor                  Professor's Department                  TST Advanced Degree Office