

One Health Collaborative Specialization Declaration of Commitment Form

_ast name:	FIIST	name:
Student ID:	Degr	ree Program:
Department / School:	Advi	sor:
Health Program (CSOH). and the advisor must read	Prior to admission to the p	laborative Specialization in One rogram, both the student applicant uirements of the program in the University of Guelph's
Submit a letter of inten-	t by November 1 of the firs	t year of study.
receive a satisfactory eva	aluation in order for the studer gible, the student will be requi	te Curriculum Committee and must nt to be eligible to continue in the ired to submit a program transfer form
committee. The name o		faculty on the student's advisory nitted to the Graduate Program study.
and ONEH*6100/6200 This includes receiving	: One Health Seminar.	Health Approaches to Research ne final assignment in ONEH*6000,
Defend a thesis that ut primary area of study.	ilizes a One Health approa	ch in the context of the student's
Graduate Student		
, requirements of the Colla	acknowledge that I have borative Specialization in C	read this form and commit to the One Health.
Signature:	Date	ə:

I, acknowledge that I have read this form and commit to supporting my student in completing the requirements of the Collaborative Specialization in One Health. Signature: Date:

Advisor