## FAMILY RELATIONS AND APPLIED NUTRITION GRADUATE SUPPLEMENTAL DOCUMENT

Last name, first name:

FRAN program(s) applying to: Masters Program:

AHN FRHD CFKS

MAN Grand River Hospital Affiliation

I have successfully completed or will be completing an honours

baccalaureate degree or equivalent prior to fall entry

**Doctoral Program:** 

AHN !!!!!FRHD

I have successfully completed or will be completing a master's

degree!prior to fall entry

I have completed or will be completing a thesis as part of my

degree prior to fall entry

## **Academic Information:**

Institution	Degree	Program	Date Conferred

## **Eligibility Information:**

Please complete the chart below indicating which courses you are proposing to meet program application requirements.

Self-declared average over last 2 years/20 credits:

Requirement (only complete those required for your program of study)	Course Code (eg. STAT*1234)	Semester Completed (eg. F18)
1 semester course in Applied Statistics (minimum 75% in AHN, FRHD & MAN)		
1 semester course in Research Methods (minimum 75% in AHN, FRHD, CFKS & MAN)		
3 one-semester 400-level courses in Human Nutrition (MAN only)		

Areas of interest (point form only):

Which faculty members do you want to review your application:

