Request for authorization to submit in the form of articles

Office of the Registrar

3000 chemin de la Côte-Sainte-Catherine Montreal, Quebec, Canada H3T 2A7



1. Student

Last name, First name		HEC ID	HEC ID number		
2. Teaching departme	nt responsible :				
Program of study		Specialisation			
3. List of proposed ar	ticles				
Author(s): Title:					
Journal or book: Current status of article:	published	submitted for publication	in preparation		
Author(s): Title: Journal or book: Current status of article:	published	submitted for publication	in preparation		
Author(s): Title: Journal or book: Current status of article:	published	submitted for publication	in preparation		
Author(s): Title: Journal or book: Current status of article:	published	submitted for publication	in preparation		
4. Student's signature	•				
Student's name		Signature		Date	
5. Approval by Resea	rch Director/Co-Dir	rectors			
Director's name		Signature		Date	
Co-Director's name (if applicable)		Signature		Date	
6. Decision and signa	ture of Program Di	rector			
Decision:	Accepted	Refused			
Program Director		Signature		Date	