**ATTACH THE FOLLOWING TO THIS REPORT:**

* RESEARCH PROGRESS REPORT: Research progress report written by the student (max 10 pages). Includes hypotheses, predictions, tests, data, and interpretation, due no less than 7 days before GAC meeting
* UP-TO-DATE CURRICULUM VITAE

STUDENT INFORMATION

Name:

Student Number:

First Term of Enrollment (YYYY-MM):

Name of Supervisor:

Name of Co-supervisor (if applicable):

GRADUATE PROGRAM

MSc  PhD

MEETING INFORMATION

Date:

GAC Meeting Number:

EVALUATION BY GRADUATE ADVISORY COMMITTEE

Knowledge of the Literature:  EXCEEDS EXPECTATIONS  MEETS EXPECTATIONS  UNACCEPTABLE\*

Objectives and Hypothesis:  EXCEEDS EXPECTATIONS  MEETS EXPECTATIONS  UNACCEPTABLE\*

Research Plan:  EXCEEDS EXPECTATIONS  MEETS EXPECTATIONS  UNACCEPTABLE\*

Research Performance:  EXCEEDS EXPECTATIONS  MEETS EXPECTATIONS  UNACCEPTABLE\*

Written Presentation:  EXCEEDS EXPECTATIONS  MEETS EXPECTATIONS  UNACCEPTABLE\*

Oral Presentation:  EXCEEDS EXPECTATIONS  MEETS EXPECTATIONS  UNACCEPTABLE\*

Overall Performance:  EXCEEDS EXPECTATIONS  MEETS EXPECTATIONS  UNACCEPTABLE\*

\*Any ‘unacceptable’ score *must* be elaborated on in the justification section below. Please provide justification for your evaluations regardless, in support of improving the student’s skills, project, and professional development.

UNSATISFACTORY OVERALL PERFORMANCE WILL RESULT IN AN INQUIRY FROM THE GRADUATE CHAIR ON THE STUDENT'S PERFORMANCE AND MAY AFFECT THEIR CONTINUATION IN THE PROGRAM.

JUSTIFY YOUR EVALUATION (COURSE AND RESEARCH PROGRESS, STRENGTHS AND WEAKNESSES OF STUDENTS, SUGGESTED AREAS OF IMPROVEMENT) - **TO BE COMPLETED BY GAC MEMBERS**

NEXT MEETING INFORMATION

Student is on track and next GAC will be held according to required timeframe

OR

Student must meet with GAC before required timeframe

Meeting must be held by:

Reason to hold additional meeting:

Major Problems have been identified (identify problems and solutions in comments below)

Project is not viable and a new direction must be take

Additional rationale and comments should be provided in the justification section above.

GRADUATE ADVISORY COMMITTEE MEMBERS SIGNATURES

Name: Signature: Date:

Name: Signature: Date:

Name: Signature: Date:

EVALUATION BY THE SUPERVISOR (AND IF APPLICABLE, CO-SUPERVISOR)

SUPERVISOR AND CO-SUPERVISOR SIGNATURES

Name: Signature: Date:

Name: Signature: Date:

STUDENT STATEMENT

STUDENT SIGNATURE

Name: Signature: Date: