PhD Transfer Exam Assessment Form

***This assessment form must be completed by the Transfer Exam Committee for students seeking to transfer from the MSc to the PhD program. This form must be submitted with their report to the Graduate Administrator following the completion of the transfer exam.***

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| --- | --- |
| Student Name: | Student Number: |
| Name of Supervisor: | Name of Co-Supervisor (if applicable): |
| Title of thesis: |

***Evaluation of Research Completed to Date***

|  |  |  |  |
| --- | --- | --- | --- |
| **Evaluation** | **Unacceptable** | **Meets Expectations** | **Exceeds Expectations** |
| Oral presentation |  |  |  |
| Written report  |  |  |  |
| *Comprehensive* knowledge in specific area of his/her research |  |  |  |
| Overall assessment of the student’s work to date |  |  |  |
| Student conducted vast majority of work | **No Yes** |
| Major scientific output (e.g. manuscript, paper, formative report) developed and prepared by the student as the primary contributor | **No** | **In Progress** | **Yes** |
| Feasibility of proposed PhD research project |  |  |  |
| Overall assessment of the student’s ability to complete this PhD project |  |  |  |

***Required comments from Transfer Exam Committee (elaborate on evaluations above)***

*Attach additional pages if necessary*

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 Transfer Exam Committee recommends student transfer from MSc to PhD program.

 Transfer Exam Committee recommends student complete the MSc program.

**Signatures**

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Name of Exam Committee Chair Date Signature (Exam Committee Chair)

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Name of Supervisor Date Signature (Supervisor)

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Name of Co-Supervisor Date Signature (Co-Supervisor)

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Name of GAC Member Date Signature (GAC Member)

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Name of GAC Member Date Signature (GAC Member)

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Name of Field Expert Date Signature (Field Expert)

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Name of Field Expert Date Signature (Field Expert)

***List additional GAC members, their affiliation and expertise, who will be invited to participate in the student’s PhD GAC (to be completed by the student and their supervisor after the exam)***