

MMI Graduate Student Progress Report

1. **Name:** _____ **ID#:** _____ **Program:** MSc PhD
2. **Supervisor:** _____ **Supervisory Committee Members:** _____
3. **Program Start Date:** _____ **Date of last Supervisory Committee meeting:** _____
4. **Assessment of Student's Research Project by Supervisory Committee:**
 - **Research Progress Assessment:** unsatisfactory satisfactory very good excellent
 - **Specific concerns, Committee recommendations and objectives, or notable accomplishments raised or discussed by Committee (attach a page if necessary)**

- **Four page progress summary completed as required?**
 yes no not applicable Progress summary attached
- **Supervisor and student signed off on Memorandum of Understanding and the Conversation Checklist?**
 yes (memorandum) yes (checklist) **Date:** _____
Note: by the end of the first term; checklist may be revisited several times in a student's career.
- **Committee approved elevation from M.Sc. Program to Ph.D. Program? Note: by 18 months into the program.**
 yes no not applicable
- **Committee agrees experimental work is sufficient for thesis?**
 yes no not applicable
- **Ethics requirement complete (8 hours)?**
 yes no _____ number of hours

5. **For PhD students, if > 18 months from start of program, indicate planned timing of Candidacy exam.**
Note: Candidacy exams should to be taken by 24 months into the PhD program but must be taken no later than 30 months into the program.

• **Candidacy exam completed:** yes no

6. **Course Work (Courses taken and grades obtained during the last year):**

7. **Funding: Student Stipend** _____ **Operating Funds** _____

8. **Publications or abstracts submitted, in press or published while in the graduate program (attach list).**

First page of each attached

	There are NO Conflicts of Interest	or	*Conflicts of Interest have been declared	
	▼		▼	
_____	<input type="checkbox"/>		<input type="checkbox"/>	_____
Supervisor Signature				Date
_____	<input type="checkbox"/>		<input type="checkbox"/>	_____
				Date
_____	<input type="checkbox"/>		<input type="checkbox"/>	_____
				Date
_____	<input type="checkbox"/>		<input type="checkbox"/>	_____
Committee Members' Signatures				Date
_____				_____
Student Signature				Date

* Actual or potential conflicts of interest should be declared to the Graduate Coordinator and/or the Department Chair.

Note: Students or supervisors may also send a confidential letter to the Graduate Training Committee, a member of the committee, the Graduate Coordinator or the Chair to alert them of any potential problems or conflicts that may impede the student's progress.