



Student: _____ Date: _____

1. Tasks completed 5 working days ahead of the meeting:

2-page update sent to committee Previous Committee Meeting form sent to committee
 Supervisory Experience Feedback Form completed and sent to committee members, **not** supervisor
 IDP completed (<https://myidp.sciencecareers.org/>) (no need to send in advance)

2. Meeting # _____ **Year of Study** _____ **Time since last meeting** _____

3. Time To Completion Form attached: Yes (required year 4 and onwards) N/A
 (Beginning Year 4 of the program, committee meetings must take place every 6 months)

****Please ask the student to step out of the room while Questions 4 and 5 are answered****

4. i) Evaluation of Student's Progress Towards Completion of Thesis/Degree:

NB: It is expected that students in their first 2 years will score in the 1-4 range and so-on, although exceptional (or poor) performance in any particular category may result in a score that is above or below the expected range.

Expectation Level for;	Year 1-2				Post- Qualification				PhD Ready		Specific Comments/Concerns
	1	2	3	4	5	6	7	8	9	10	
Progress:											
Knowledge of Field											
Oral Communication											
Written Communication											
Critical Analysis											

ii) Progress since last meeting (check one):

Satisfactory Concerns have been raised Unsatisfactory

One "Unsatisfactory" report triggers a meeting with the Associate Chair, Graduate Studies; Two "Unsatisfactory" reports may constitute grounds for dismissal from the program.

iii) If any concerns were raised, please outline recommended actions on page 2

5. The student has permission to write: Qualifying Proposal Thesis Not Applicable

6. Outline experimental recommendations/specific expectations for next meeting on page 2

****Please ask the student to return, and review Questions 4-6 with them****

****Please ask the supervisor to step out of the room while student and committee members discuss the Supervisory Experience Feedback Form****

Use this page for recommendations/expectations for next meeting/notes

Signatures:

Student		Comm. member	
Supervisor		Comm. member	
Comm. member		Comm. member	

Date for next meeting: _____ ***REQUIRED***

Students must email the completed form to graduate.immunology@utoronto.ca and keep a copy for yourself for future meetings. The Associate Chair, Graduate Studies will sign off and it will be added to your student file.

Assoc. Chair, Grad. Studies: _____ Date: _____