



**GRADUATE STUDIES** – Supervisory Committee,  
Thesis Topic and Preliminary Progress

Fillable form: open in Adobe Acrobat and click Fill & Sign

**Note: To be returned to the office of the Dean of Graduate Studies**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

ID #: \_\_\_\_\_ Department: \_\_\_\_\_

Thesis Title: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Program Start Date: \_\_\_\_\_

Expected Date of Completion: \_\_\_\_\_

Date of Committee Meeting: \_\_\_\_\_

**COURSES COMPLETED/TO BE COMPLETED:**

Course Number & Title	Term	Mark (if completed)

**PROGRESS:**     Satisfactory     Requires further review\*     Unsatisfactory\*

**RESEARCH PROJECT:**

**Committee Comments** (outline specific training and research goals for the first 12 months, provide a timeline outlining specific short-term research goals and Committee plans to further monitor progress, attach additional pages if necessary):

**Committee Members:**

_____ Supervisor	_____ Date	_____ Email
_____ Co-Supervisor (if applicable)	_____ Date	_____ Email
_____ Committee Member (internal)	_____ Date	_____ Email
_____ Committee Member	_____ Date	_____ Email
_____ MSc Candidate	_____ Date	_____ Email