

Date of Meeting: _____

M.Sc.

SUPERVISORY COMMITTEE MEETING – ANNUAL REPORT

Department of Biology

Student: _____ **Student Number:** _____

PLEASE PRINT (GIVEN NAME) (SURNAME)

<u>Completed Courses:</u>	RESEARCH PROGRESS Please ✓ research progress.		NAME (PLEASE PRINT)	SIGNATURE
<u>Future Courses:</u>		<i>Unsatisfactory</i>	<i>Satisfactory</i>	
	Supervisor:	<input type="checkbox"/>	<input type="checkbox"/>	
	2 nd Member	<input type="checkbox"/>	<input type="checkbox"/>	
	3 rd Member	<input type="checkbox"/>	<input type="checkbox"/>	
	4 th Member	<input type="checkbox"/>	<input type="checkbox"/>	

Current Term: _____ *Is this a request for TRANSFER?* **YES** **NO**

COMMENTS:

Overtime/Out of Time Students: Plan for next 6 (six) months:

DATE _____ DEPARTMENTAL CHAIR or /CHAIR OF BIOLOGY GRADUATE STUDIES COMMITTEE _____

This report has been seen by the student. If student so wishes, he/she may append additional comments.

STUDENT: _____ *STUDENT SIGNATURE:* _____