



PhD ADVISORY COMMITTEE REPORT

Research progress reporting for Doctoral thesis students at McGill is mandatory. Such reporting must involve setting mutually acceptable objectives, recognition of the student’s degree progress, and evaluation of the student. Some advantages of agreed upon expectations and clearly defined requirements are to help reduce time to completion and misunderstanding.

This form should be completed by the student (please type) prior to the Advisory Committee meeting, except for the last page which should be completed by the Advisory Committee members at the meeting. It is the student’s responsibility to electronically submit the completed form to the Graduate Program Director (gpd.microimm@mcgill.ca) and the Student Affairs Coordinator (grad.microimm@mcgill.ca) within one week of the meeting.

STUDENT'S NAME

MCGILL ID

Date of the Meeting

Program start date (term/year)

Advisory Report Number: This does NOT include previous M.Sc. Advisory Committee Reports.

#1

#2

#3

#4

#5

#6

#7

Is this an interim report after an unsatisfactory report?

Yes

No

- 1. Objectives and timelines (for a first report)/Objectives set at a previous meeting (for a second report and over)**

2. Objectives achieved (for a second report and over)

3. Objectives incomplete (for a second report and over)

4. Objectives and timelines for next year (for a second report and over)

5. Other activities and accomplishments, courses completed and registered for:

6. Additional program requirements met (e.g. orientation session, ethics workshop, graduate student seminars, current topic seminars, research day, etc.):

7. Thesis submission timelines and plan for stipend during thesis writing jointly agreed upon by the student and supervisor (for a third report and over)

8. Your Stipend (source, amount):

9. Prizes and Awards:

10. Students are encouraged to address and discuss any issues they are struggling with (complete if applicable).

11. Indicate any changes in your Letter of Understanding.

Overall Evaluation

To be completed by the **designated Chair** of the Advisory Committee meeting. If the handwriting is illegible, the supervisor must type in the comments on a separate sheet and attach it to the original form. The typed sheet must also be signed by the supervisor, the student, and the committee members. ***An unsatisfactory meeting must lead to a follow-up progress tracking meeting, not sooner than 4 months after the first meeting and not later than 6 months after the first meeting.**

Excellent: Very good: Good: Fair: *Not Satisfactory:

***Specify the month of the follow-up meeting:**

Explanation of Above Rating:

Please justify your overall evaluation by assessing the following criteria:
1. Quality of written report:
2. Clarity, quality and organization of oral presentation:
3. Understanding and critical analysis of project and emerging data:
4. Progress made in research project since last meeting:
5. Overall development of competences and skills set:
6. Suggestions, challenges, priorities and action items:

External Award Holders must complete this box and email a copy of the entire progress report to GPS Funding, copying their supervisor to the email.

Tri-Council Agency: NSERC ___ SSHRC ___ CIHR ___ Start date of award: May 1 ___ Sept 1 ___ Jan 1 ___

- A) Award holders who are registered full-time must limit the number of hours of employment to 450 hours over a 12-month award period.
 - I did not work any additional hours to my full-time research.
 - I worked ___ hours during my award year. Nature of paid work: _____
- B) Award holders are responsible for reporting any changes in program when they occur because it may affect ongoing eligibility (i.e., leaves of absence, change in supervisor or research, change in registration, etc.).
 - There were no changes to my student status in the past year
 - There were changes to my student status in the past year: _____

SIGNATURES (PLEASE PRINT NAMES): * Mandatory. Must be present to sign together.	<i>I agree with the statements and evaluation in this Report.</i>	<i>Has a conflict of interest arisen in respect of any of the parties signing?*** (See examples)</i>	DATE
_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____
* STUDENT'S NAME			STUDENT'S SIGNATURE
_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____
* SUPERVISOR'S NAME			SUPERVISOR'S SIGNATURE
_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____
* CO-SUPERVISOR'S NAME (if applicable)			CO-SUPERVISOR'S SIGNATURE (if applicable)
_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____
* COMMITTEE MEMBER'S NAME			COMMITTEE MEMBER'S SIGNATURE
_____ (Role: _____)	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____
OTHER MEMBER'S NAME (Role: _____)			OTHER MEMBER'S SIGNATURE
_____ (Role: _____)	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____
OTHER MEMBER'S NAME (Role: _____)			OTHER MEMBER'S SIGNATURE
_____ (Role: _____)	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____
OTHER MEMBER'S NAME (Role: _____)			OTHER MEMBER'S SIGNATURE

Anyone listed above who does not agree with the statements and evaluation in this Report must attach an explanation. If any document has been attached to this report, please check here:
In case of disagreement, the student or supervisor should consult the Unit's Graduate Program Director or a GPS Associate Dean.

GPD approval is required on all Progress Tracking Reports; attendance at meeting is not. If the GPD is the supervisor, the Chair must sign here.

GPD (Chair) Name: _____ Signature: _____

[Regulation on Conflict of Interest](#) - **If anyone checks YES, the form must be submitted to the Dean of GPS with an explanation. If there is any doubt, contact the appropriate GPS Associate Dean.

“Conflicts of interest may take various forms and may arise in various contexts. A potential conflict of interest will exist whenever a member of the University community is in a position to influence the conduct of research, academic, human resource, business, financial, governance or other matters in ways that could lead to personal gain for the member or a related party, or give improper advantage to others, to the detriment of the University or other members of the University community.”

“The Regulation recognizes that the existence of a potential conflict situation does not necessarily connote misconduct or preclude the involvement of a member in the situation in which the conflict has arisen – provided the conflict is recognized, disclosed, assessed and addressed. However, it must be recognized that not all conflicts of interest, even if disclosed in a timely manner, will be permitted.”