



Experimental Surgery
Montreal General Hospital
1650 Cedar Ave., Room C9-169
Montreal, QC H3G 1A4

Chirurgie Expérimentale
Hôpital Générale de Montréal
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gradstudies.surgery@mcgill.ca
www.mcgill.ca/experimentalsurgery

Graduate Student Research Progress Tracking

FAST TRACK TO PhD - EXAMINATION EVALUATION REPORT FORM

(To be completed by the Supervisor and RAC Chair, members)

Student name: _____ Supervisor: _____

Degree & Year: _____

Degree Dates: *start date* _____ *to:* _____

Request to Transfer to PhD for: _____ term
(Fall or Winter; Year)

Evaluation of the Student and their Report

Presentation:

Critical Assessment:

Responses to Questions:

****A copy of the student's Progress Report (15-20 pages) must be submitted with this report.****



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By signing below, all parties acknowledge that the objectives and timelines described above are acceptable. Please note that failure to meet objectives on any two progress reports may be cited as grounds for requiring that a student withdraw from the program of study.

Recommendation for Transfer to PhD:

Recommended: _____ Not Recommended (see p.1 for details): _____

Supervisor: _____ Date: _____

Student: _____ Date: _____

Chair/Director (*or delegate*): _____ Date: _____

Research Advisory Committee (RAC) member(s):

Name: _____ Date: _____

Name: _____ Date: _____

Name: _____ Date: _____

Name: _____ Date: _____

Student did not sign form and does not agree with the objectives (explanation required; see attached).