



RES SPRING REVIEW

MASTERS DEGREE

DOCTORAL DEGREE

PART A – TO BE COMPLETED BY THE STUDENT

Student Number: _____ Last Name: _____ First Name: _____

Email Address: _____ Phone Number: _____

Program Start Date: _____ Proposed End Date: _____

If required, have you received ethics approval? Yes No Not Required

Summarize Research Area/Topic:

- | | | | |
|-------------------------------------------------------------------------------|-----|-------------|----|
| (1) Has your research supervisory committee been formed? | Yes | Date: _____ | No |
| (2) Have you held a supervisory committee meeting? | Yes | Date: _____ | No |
| (3) Has your research proposal been approved? | Yes | Date: _____ | No |
| (4) Have you completed your comprehensive examination? <i>(doctoral only)</i> | Yes | Date: _____ | No |
| (5) Have you been advanced to candidacy? <i>(doctoral only)</i> | Yes | Date: _____ | No |

Note: UBC Graduate and Postdoctoral Studies (G+PS) policy stipulates that candidacy must be achieved within thirty-six (36) months of starting a doctoral program. (<https://www.grad.ubc.ca/forms/recommendation-advancement-candidacy>)

(6) Have you taken a leave of absence in the last twelve (12) months? Yes No
If yes, what was the duration of your leave in months? _____

(7) Have you had a program extension in the last twelve (12) months? Yes No
If yes, what was the duration of your extension in months? _____

(8) How frequently do you meet with your supervisor? _____ Date of Last Meeting: _____



FUNDING

(1) Awards, Grants, and Scholarships

Please list any awards, grants, or scholarships applied for/or received over the last year. If you are currently receiving funding, complete the additional award details (Term, Date Received, and Amount).

Award Status	Name of Award	Award Timeframe		Amount (Per year total)
		Start Date	End Date	
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Award Status Legend

Please indicate the status of your award using the legend below:

- A** = Applied, waiting for a decision.
- C** = Currently receiving funding.
- P** = Pending, funding awarded and will be issued.

(2) Teaching and/or Research Assistantships

Please use this space to describe any teaching or research assistantships you have held during the last year

Publications

Please use this space to describe any publications you have produced during the last year. Indicate if publication is submitted, accepted, in-press (with proposed publication date) or published.

Conference Presentations

Please use this space to describe conference presentations made during the last year.



Student Plan/Goals

Please summarize your plans and goals for the upcoming academic year.

- I verify that I have registered in every semester (including summer terms), except when on a leave of absence approved by the Graduate and Postdoctoral Studies (G+PS).

- I verify that my account is not on financial hold. (Check SSC account)

Student Name (please print)

Date (Part A was completed)

Please submit this completed report to your supervisor to complete Part B.



PART B – TO BE COMPLETED BY THE SUPERVISOR WITH THE STUDENT

Please review the information provided in Part A and then complete Part B.

Supervisor Name: _____

Co-Supervisor Name: _____
(if applicable)

Student Progress Summary in the last twelve (12) months: Satisfactory Improvement Required Unsatisfactory

If satisfactory, please provide rationale below: *(If more space is required, please append a letter to this form.)*

If improvement required, please provide rationale below: *(If more space is required, please append a letter to this form.) Please outline the plan for improving student progress in the next twelve (12) months*

If unsatisfactory, please provide rationale below: *(If more space is required, please append a letter to this form.) Please outline the steps required for improving student progress in the next twelve (12) months*



Supervisory Committee (if a committee has been formed)

The supervisory committee must be comprised of a supervisor (or co-supervisors) and at least two other faculty members. Please ensure that the composition of the committee follows the guidelines listed on the Graduate and Postdoctoral Studies' (G+PS) website:

<https://www.grad.ubc.ca/current-students/supervision-advising/supervisory-committee>
<http://ires.ubc.ca/information-for-current-students/supervisory-composition-and-external-reviewer/>

Committee Members:

	Last Name	First Name	Department/Unit
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

Has the committee met with the student in the last twelve (12) months? Yes Date: _____ No

Graduate Advisor/Program Manager's Comments:

Please use this space to make additional comments.

Meeting Required?

_____	_____	_____
Student's Signature	Print Name	Date
_____	_____	_____
Supervisor's Signature	Print Name	Date
_____	_____	_____
Co-Supervisor's Signature (if applicable)	Print Name	Date
_____	_____	_____
Graduate Advisor's Signature	Print Name	Date

NOTE: Student and Supervisor should each retain a copy of this Progress Report.

Please complete this form with all student and supervisor signature(s) and email a copy of it to the IRES Graduate Program Manager: