

**First Name:**

**Last Name:**

**Student ID Number:**

**Program**

Date student began Masters studies at McMaster:

Date of this Supervisory Meeting:

Date of last meeting:

**\*\*Every Masters student must have a Supervisory report at least once during the program. This report must be received by the School of Graduate Studies within 12-14 months of starting the program \*\***

**Research Ethics Approvals**

Does research involve human participants, their records or tissues?	YES	NO
If yes, has approval been obtained from the research ethics board?	YES	NO
Does research involve animals or their tissues?	YES	NO
If yes, has approval been obtained from the research ethics board?	YES	NO

**Field Trips**

Does research involve international travel, which poses an identifiable additional risk under the university's risk management policy?	YES	NO
If yes, has student completed risk management forms and obtained approval?	YES	NO
If a 'Request to be Full Time Off Campus' form is needed are there plans for submitting it?	YES	NO

Please note: the relevant forms and instructions can be accessed here:

[Main Risk Management Document](#)

[The Supplementary Risk Management guideline](#)

[Request to be Full Time Off Campus Form](#)

**Clarifications regarding timing of the meeting & report**

- 1) Students who are completing a 24-month program are expected to have a supervisory report completed within the first 12 months of their program.
- 2) The deadline for a Masters supervisory report for a student who has been on leave is extended by the duration of the leave beyond the nominal deadline.

- 3) Part-time students, like full-time students, are required to have a supervisory report within 12-14 months of starting.
- 4) Students following an 'accelerated' Master's degree timeline are expected to submit a supervisory report within 6-8 months of starting the program.

**First Name:**

**Last Name:**

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**To be completed by the student and submitted to their supervisor**

Details of progress made toward meeting degree requirements since beginning the program if this is the first report, i.e., courses completed, comprehensive examination preparation/writing/oral defense, thesis proposal, research, chapters written/revised, conference presentations, publications:

**Student Signature:** \_\_\_\_\_

**Date:**

Supervisor Name or Supervisory Committee Members: Initial below to affirm that you have read the student's report

Supervisor:

Committee Member:

Committee Member:

Committee Member:

First Name:

Last Name:

Student ID Number:

**Supervisor's Report (this section must not be filled out by the student and must not be left blank.)**

**Part A: Progress**

Progress made in accomplishing goals toward meeting degree requirements since beginning the program (if this is the first report, else progress since the last report if additional meetings were required):

(i.e., courses completed, comprehensive examination preparation/writing/oral defense, thesis proposal, research, chapters written/revise, conference presentations, publications).

**Supervisor's report: This section contains the assessment and recommendations by the supervisor or the supervisory committee when one exists**

**Part B: Goals**

Specific goals for the next interval of \_\_\_ months (attach an additional page if necessary):

Anticipated date for the completion of degree requirements

Date:

**Part C: Areas for improvement and additional direction:**

**Additional comments regarding the impact of COVID restrictions on the research plan for the student:**

## Supervisor's or Committee's Assessment

Evaluation of overall progress at this stage in the degree since beginning Masters studies:

### RATING

#### [E] Excellent

The student has exceeded expectations in terms of academic and/or research progress. This rating may reflect exceptional initiatives taken by the student to address unexpected challenges in their course of study.

#### [G] Good

The student is meeting and achieving all expectations in terms of academic and/or research progress. There are no areas of concern with respect to meeting goals and milestones for research and academic progress. This rating is to be used for students who show promise for completing the degree in a timely manner.

#### [S] Satisfactory

The student is meeting and achieving most expectations in terms of academic and/or research progress. There is some concern around the pace and/or the meeting of goals and milestones for research and academic progress. The committee has some concerns with the student's skills growth and subject area expertise. This rating is to be used when the committee identifies areas for improvement and where some expectations at this stage of degree development are not being met. Details about concerns should be provided in Part C.

#### [M] Marginal\*

The student is meeting and achieving some expectations in terms of academic and/or research progress. There is significant concern around the pace and/or the meeting of goals and milestones for research and academic progress. The committee has significant concerns with the student's skill growth and subject area expertise. This rating is to be used when the committee identifies several areas for improvement and where significant expectations at this stage of degree development are not being met. Areas for improvement should be provided in Part C.

#### [U] Unsatisfactory\*

There is an unreasonably low rate of academic and/or research progress. The committee has serious concerns about the pace and/or the meeting of goals and milestones for research and academic progress, and whether these goals can be achieved in a reasonable period of time. Areas of serious concern should be provided in Part C. In cases where this category is used, the program should determine whether the student should be required to withdraw or be allowed to continue in the program until their next committee meeting.

Print Name

Email Address

Rating

Signature

### Supervisor

2<sup>nd</sup> Member

3<sup>rd</sup> Member

4<sup>th</sup> Member

\*Where progress is deemed marginal or unsatisfactory, attach a detailed explanation of what must be accomplished over the next 6 months in order to remedy the situation and whether an additional report will be generated at that time.

This completed report has been seen by me.

Student's Signature:

Date:

Department Chair's Signature:

Date:

The student may append additional comments. A student who thinks that s/he is receiving unsatisfactory supervision is urged to follow the recommended grievance procedure for the Department or Program and/or to contact the Department Graduate Advisor, Department/Program Chair, or the Associate Dean of Graduate Studies.