## DEPARTMENT OF MICROBIOLOGY AND IMMUNOLOGY ADVISORY COMMITTEE MEETING FORM

## PART A: To be filled out by student.

A copy of part A, including the written Advisory Committee Report, is to be provided to Advisory Committee members at least one week prior to the committee meeting. Include publication and abstract list in this report.

Student Name:	Meeting Date:		
Candidate for Degree of: PhD MSc			
If you are currently an MSc candidate, are	you considering PhD studies?	Yes	No
Program Start Date (Month/Year):		_	
Anticipated Completion Date (Month/Yea	nr):	_	
Committee Meeting Number:			
Committee Members			
Date of most recent Pathfinder submission	n:		
Course Work (Indicate courses being take	n and completed):		
Research Project Title:			
Brief summary of progress made to date (	also attach the detailed advisory	committee rep	oort):

PART B: To be filled out during the meeting	by the	Advisory (	Committe	ee.	
Specific recommendations of the committee problems to solve, write up thesis):	(e.g.	suggested	courses,	research	priorities,
<b>Evaluation of student (since last meeting):</b>			_		
Please ask the student to leave the room while	the cor	nmittee di	scusses th	ieir evalua	ation.
Was a written report by the student given to the	committ	tee? Yes	No		
	un	satisfactor	y	satisfact	tory
Familiarity with the subject of research					
Progress in research Course work					
Students receiving two consecutive unsatisfact	ory rat	ings will b	e require	d to meet	with the
<b>Graduate Studies Committee for an interview</b>		ing their l	ack of pr	ograss T	`he
	•				
consequences of consistent failure to progress graduate program.	may in				
consequences of consistent failure to progress graduate program.	may in				
		clude a red	quest to v	vithdraw 1	from the
graduate program.		clude a red	quest to v	vithdraw 1	from the
graduate program.		clude a red	quest to v	vithdraw 1	from the
graduate program.  If performance in any area listed above is deer	ned uns	clude a red	quest to v	v <b>ithdraw</b> f	from the
graduate program.	ned uns	clude a red	quest to v	v <b>ithdraw</b> f	from the
graduate program.  If performance in any area listed above is deer	ned uns	clude a red	quest to v	v <b>ithdraw</b> f	from the

Once the section above is complete, please invite the student back into the room and discuss the committee's evaluation.

PART C: Next Steps			
Experimental work completed/permission to write thesis?	Yes	No	
For M.Sc and Pre-Candidacy PhD students, two meetings are intervals	required per year at ~	six month	
Note: The committee can choose for the Candidacy Exam to Following successful completion of the Exam, the Committee between advisory meetings.			
Candidacy Exam Complete? Yes Date		No	N/A
Date of Next Meeting (if applicable)			
If permission to write has been granted, the supervisor will first advisory committee member below will read and approve the		subsequently	y the
The student will provide a thesis to the above mentioned advis	sory committee memb	per by :	
<b>Signatures</b> (to be done upon completion of forms: Upon signing this, I acknowledge reading this completed form.			
lvisory Committee Members:	Supervisor(	s):	
Student:			

Return completed form to the Graduate Coordinator, Department of Microbiology & Immunology within one week of the Advisory Committee meeting.