PhD Progress and Activity Report

# Part 1: Student Details

To be completed by the Student

**First name**:

**Last name**:

**WLU ID**:

**WLU email**:      @mylaurier.ca

**Program** (e.g. PhD Geography):

**Advisor**:

**Number of terms completed as of May 1 of the current year**: Full-time       Part-time

**Term Form Submitted (add year)**: Spring 20       Fall 20      Winter 20

Each doctoral student must complete the Progress and Activity Report and submit it to the advisor (or Graduate Co-ordinator if the advisor is not yet confirmed), by April 15 each year. The full report (including the assessment, and signatures) is due in the Faculty of Graduate & Postdoctoral Studies by June 1 annually). The Report may be required more than once each year, where circumstances warrant. Late submission of this report may result in a delay of your financial support.

# Part 2: Report on Activities

To be completed by the student

### Indicate progress in the last year on completion of the requirements of the program. Comment, if applicable, on progress in research, data collection, analysis and/or writing of dissertation, comprehensive exam, and courses/practicums completed.

### Report on papers submitted or published, presentations at conferences or elsewhere, courses taught, scholarship applications and/or professional development (e.g., ASPIRE workshops, course lectures given).

Indicate if there is anything that has hindered progress in the last year (or since your last Report).

### Specific goals for the next academic year:

#### Fall:

#### Winter:

#### Spring:

# Part 3: Program Milestones

To be completed by the Advisor (or Graduate Program Coordinator if no advisor yet confirmed).

Based on the number of terms completed to date, identify the milestones required in the program, and indicate completion or expected date of completion for each. **Please include all milestones required from the commencement through the duration of the program.**

### Milestone 1

Completed  Completion date (DDMMYYYY):

Not completed  Expected date of completion (DDMMYYYY):

### Milestone 2

Completed  Completion date (DDMMYYYY):

Not completed  Expected date of completion (DDMMYYYY):

### Milestone 3

Completed  Completion date (DDMMYYYY):

Not completed  Expected date of completion (DDMMYYYY):

### Milestone 4

Completed  Completion date (DDMMYYYY):

Not completed  Expected date of completion (DDMMYYYY):

### Milestone 5

Completed  Completion date (DDMMYYYY):

Not completed  Expected date of completion (DDMMYYYY):

# Part 4: Overall Assessment

To be completed by the Advisor or Graduate Coordinator.

### Comment on the student’s progress and accomplishments during the past year.

### Are the proposed goals reasonable and compatible with timely degree completion?

### If delays or obstacles to progress have been reported, please comment on remedial action.

### How often did you meet with the student over the past reporting period:

Weekly  Monthly  Once per term Other (specify):

### How often did the advisory committee as a whole (if established) meet with the student:

Weekly  Monthly  Once per term Other (specify):

### Advisors should respond to drafts of the dissertation in a timely fashion. Answer the following question ONLY if the draft research was submitted by the student during this academic year.

Entire dissertation draft Feedback provided within (days, weeks)

Portions of dissertation Feedback provided within (days, weeks)

Other research materials Feedback provided within (days, weeks)

### Assess this student’s overall progress since the last report – (S) Satisfactory; (C) With some concerns; (U) Unsatisfactory

**Satisfactory**: may be assigned if the student is meeting all the normal progression requirements in a timely and satisfactory manner.

**With** **some concerns (first instance)**: may be assigned if the student is struggling to meet the normal progression requirements of the degree, or if the student’s academic and professional development is partially meeting the overall expectations of the program. Where progress is deemed (C) With Some Concerns, an Action Plan, including specific activities and/or accomplishments and timeline to completion, is required. The Progress and Activity Report must be completed within a maximum of 6 months.

Action Plan attached; 6-month review scheduled for MM/YY

**With Some concerns (second instance)**: the second instance normally will result in the student being placed on Academic Probation. An Action Plan, including specific activities and/or accomplishments and timeline to completion, is required. The Progress and Activity Report must be completed within a maximum of 6 months.

Action Plan attached; 6-month review scheduled for MM/YY

**Unsatisfactory**: Only in exceptional cases or circumstances is this category available without an initial assessment of **With Some Concerns** and may be assigned if

1. the student is not meeting the normal progression requirements of the degree and/or
2. the student’s academic and professional development is not meeting the overall expectations of the program, ***or***
3. The student has not met the requirements of the Action Plan following a second assessment of ‘with some concerns’ in an earlier review period.

**Dissertation Advisor**

A Regular Member of the Graduate Faculty of the university and is a full-time faculty member in the academic unit/program of the candidate. The Advisor is principally responsible for mentoring the student’s progress to completion (research, course selection, professional development).

First name:       Last name:

Signature:       Date:

Two other Committee Members:

One who is a Regular Member of the Graduate Faculty of the university and a full-time faculty member in the WLU academic unit/program of the candidate, and

One who is either a Regular Member of the Graduate Faculty of the university from any program, or a faculty member elsewhere who meets the same requirements. Both DAC Member 2 and Member 3 provide feedback, and participate actively in the dissertation progression of the student

**Committee Member 2** First name:       Last name:

Signature:       Date:

Co-Advisor

**Committee Member 3** First name:       Last name:        
  
Signature:       Date:

Co-Advisor

A fourth member is optional, and may be an academic or professional outside the university with appropriate expertise. This 4th DAC member must hold Associated or Special Membership on the Graduate Faculty at WLU.

**Committee Member 4 (Optional)** First name:       Last name:        
  
Signature:       Date:

Co-Advisor

# Part 5: Acknowledgements

To be completed by the student and the Graduate Coordinator.

**Student Confirmation**

By signing this submission, I confirm that I have read the Progress and Activity Report including the responses from my advisor and the advisory committee.

Signature:       Date:

**Graduate Coordinator**

By signing this submission, I confirm that I have read the Progress and Activity Report, and where required, acknowledge the expectations as outlined in the Action Plan (attached).

Last name:       First name:        
  
Signature:       Date:

*Any individual program representative cannot approve this form at multiple levels; each form must have a one-up approval (e.g., research advisor cannot also approve as Graduate Program Coordinator).*