# Centre for Neuroscience Annual Progress Report

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| Student Name/Number: |  |
| Date: |  |
| Program: |  |
| Year in Program: |  |

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| Supervisor Name: |  |
| Advisory Committee members: | 1..2. |

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| --- | --- |
| Date of Completion of comprehensive Exam or proposed date of comprehensive (**PhD only**): |  |
| Timeline for completion of thesis: |  |
| Date of last Committee Meeting: |  |

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| External Awards Held: |  |
| Internal Awards Held (i.e. QEII, not QGA) |  |

**To be completed by the student:**

Please indicate progress in the last year on completion of the requirements of the program. Comment, where applicable, on progress in research, data collection, analysis and/or writing of dissertation.

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Please indicate specific goals for the next academic year:

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Please indicate any delays or obstacles that may affect your progress:

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Please attach a summary of papers submitted or published, conferences, presentations, grant applications, and/or professional development.

**Signatures:**

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| --- | --- | --- |
| Student Signature: |  | Date: |
| Graduate Coordinator: |  | Date: |
| Student Supervisor: |  | Date: |

**To be completed by Student Graduate Supervisor.**

Please comment on student progress or delays:

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