**LFS Graduate Student Supervisory Committee Meeting Report**

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| Last name: Click here to enter text. | First name: Click here to enter text. |
| Student number: Click here to enter text. | Email: Click here to enter text. |
| Graduate program: Click here to enter text. |  |
| Meeting date, time & location: Click here to enter text. | |
| Supervisor: Click here to enter text. | |
| Committee members present: Click here to enter text. | |

**Progress Report & Recommendations**: (Please provide a copy (PDF or paper) of any material circulated, including the thesis research proposal, to the Graduate Programs Office, for the student’s file. Both the student and the Supervisor must sign these minutes.) You may use additional pages if necessary.

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| Click here to enter text. |

**Supervisor signature**: Click here to enter text.

**Student signature**: Click here to enter text.

*Note: Please copy to all committee members, and submit this report to the Graduate Programs Office within 2 weeks of the meeting date.*

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| **For Pre-Comps Meetings:** Proposal Accepted by Committee? Yes  No  Tentative Comp Exam Date: Click here to enter text. |

*Once signed, please submit to the Graduate Programs Office, Room 291, MacMillan Building.*