

Office of the Dean Faculty of Graduate and Postdoctoral Affairs 512 Henry Marshall Tory Building 1125 Colonel By Drive Ottawa, Canada KIS 586 Tel:(613) 520-2525 Fax: (613) 520-4049

Student Progress Report - Doctoral Programs

Student's Name:	Supervisor's Name:
Student No.:	Term Number (since initial registration):
Department:	Expected Date of Completion:

Part 2: Missed Milestones

Part 1: Student Information

If this student has missed a milestone, please provide a brief commentary and indicate when the milestone will be met. If no milestones have been missed <u>do not</u> fill out this part of the form.

It is important that the student, their supervisor, and the graduate supervisor/ associate chair have signed off and are in agreement.

Signature of Student

Signature of Student's Supervisor

Signature of Graduate Supervisor/ Associate Chair

Date

Date

Date

Part 3: Progress Report on Doctoral Dissertation



Report progress made during most recent term. If goals were not met, please explain.

Indicate the goals for the next term and comment on progress towards completion of dissertation.

It is important that the student, their supervisor, and the graduate supervisor/ associate chair have signed off and are in agreement.

Signature of StudentSignature of Student's SupervisorSignature of Graduate Supervisor/
Associate ChairDateDateDate

Please return this form to the Faculty of Graduate and Postdoctoral Affairs

At Carleton University, we recognize and respect the importance of privacy. Personal information that we collect is kept confidential. In accordance with Section 41 of the Freedom of Information and Protection of Privacy Act, Carleton University will only use the information in its custody or control in 1hefollowing circumstances: where the individual identifies the particular information and consents to its use; for the purpose for which it was collected or a consistent purpose (i.e. a purpose which the individual might have reasonably expected).