

## ADVISORY COMMITTEE REPORT MASTER'S AND DOCTORAL RESEARCH PROGRAMS

STUDENT IDENTIFICATION										
Last name, First name							Student ID	Student ID Status in Canada		
Department/School Program							Option (if applicable)			
Semester and year of admission		Registration status						Cumulative average /4,3		
Supe	visor		Co-supervisor				pervisor	sor		
Main	location of your research activities	(campus	s or aff	iliated	l resea	arch cei	nter)			
GUIE	DELINES									
The Advisory Committee must meet at least once per year, or more often (see Policy on the constitution and operation of Advisory Committees for Master's and Doctoral Research Students in the Faculty of Medicine).  At the meeting, the Advisory Committee assesses the competencies listed below, and discusses them with the student following the presentation/discussion. In the space provided or in an attached document, the Committee reports on the project's progress and its overall assessment of the project and the student. It specifies the objectives to be achieved over the coming year (academic training, compulsory steps along the way, results, publications, conferences, etc.).  The student is responsible for submitting the report to the graduate program director, on behalf of the Advisory Committee, no later than three weeks after the meeting. Any problematic situation must be reported to the graduate program director. In cases where intervention with the student is appropriate, the graduate program director has primary responsibility. If intervention with the supervisor is necessary, it is the responsibility of the department head.  This report must be filed in the student's file, after being signed by the graduate program director.  PROGRESS AND ACTIVITIES REPORT  On the basis of the assessment submitted by the student and according to the training objectives, we consider that the student's progress and activities are:  Meeting expectations  Exceeding expectations  Below expectations  Specific problematic situation  SKILLS ASSESSMENT (If you give a rating of 1 or 2, you must justify your assessment with a comment).										
	Criteria		Appreciation				*Comments (if necessary, add an appendix)			
1	Subject knowledge	1	2	3	4	5				
2	Related scientific knowledge									
3	Ability to formulate hypotheses	s								
4	Coherent project presentation									
5	Analytical and synthesis skills									
6	Critical thinking									
7	Capacity to receive feedback									
Specific issues related to the project's implementation or progress										



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OBJECTIVES FOR THE COMING YEA	.R	
The plan proposed by the student is rea	listic and approved.	
The plan proposed by the student has b	een modified.	
The changes to the original plan are as follow	ws:	
*SPECIFIC COMMENTS		
SIGNATURES OF THE COMMITTEE M	MEMBERS AND THE STUDENT	
Signature - Advisor acting as president	Name	Date
Signature - Advisor	Name	Date
Signature - Supervisor	Signature - Co-supervisor	Date
Student's signature*	*I have read this evaluation (if necessary, please attach your comments on a separate sheet)	Date



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GRADUATE PROGRAM DIRECTOR								
Signature	Name	Date						
Signature	ivame	Date						
Have any problem situations been ident	ified?							
If applicable, indicate the situation(s) no	ted:							
Ratings of 1 or 2 for more than two								
Project progress considered unsatis								
Supervision issues reported by Other	the student the supervisor							
In the event of a problematic situation, s	pecify the nature and type of follow-u	up proposed.						