

Research Course Progress Report

Every student and supervisor must turn in at least one *Progress Report* form before the last day to drop a course without penalty in Arts and Science. Part I is to be filled out by the student and Part II is to be filled out by the supervisor. The information from the completed form will be used as a record of student progress, and will also be used to identify areas for improvement in Health Studies research courses as a whole. The *Progress Report* should be submitted by email to the Health Studies Program Director (healthstudies.director@utoronto.ca) or in person to the Office of Academic Services at University College (15 King's College Circle, Room 173) before the course drop date.

Student name: _____ **Student #:** _____

Supervisor's name: _____

Title of Project: _____

Part I: Student Progress Report

1. What progress has been made towards completing the tasks outlined in the evaluation plan?

2. What issues have been encountered that have hindered progress (if any)? How can these issues be addressed?

4. How might the student and/or the supervisor improve the experience (for either the student or the supervisor)?

PART II: Supervisor Progress Report

Grades to Date

Based on the Evaluation Plan developed in the Research Proposal form, please list any assignments completed to date and the grades awarded to the student. Note that this is a summary form; students should receive substantive feedback on their assignments as soon as possible after they are submitted.

Note: The student **must** receive at least 15% of their grade before the last day to drop a course without penalty in Arts and Science.

Assignment (Description & scope)	% of Final Mark	Grade Achieved

Supervisor's Assessment to Date

1. Do you agree with the student's assessment of their progress towards completing the tasks outlined in the evaluation plan? Please explain.

2. What, if any, issues have arisen that need to be addressed?

Health Studies Independent Research Courses
(HST450Y, HST451Y, & HST480H)



3. To what extent has the student met your expectations?

4. How might the student and/or supervisor improve the experience (for either the student or supervisor)?

Signatures

Student

Signature: _____ Date: _____

Student name (print): _____

Supervisor

Signature: _____ Date: _____

Supervisor name (print): _____

If you have any questions or concerns, please contact the Health Studies Program Director at healthstudies.director@utoronto.ca, or the Program Assistant, Office of Academic Services
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