# DEPARTMENT OF EDUCATIONAL STUDIES FACULTY OF EDUCATION

**2015 - 2016 Annual Progress Report – MA**

**To the student:** The purpose of this report is to make sure we have current information on file and to encourage your progress through your graduate program. To reduce paper use and to facilitate data entry, please fill out this form (Part A only). Save it. Return the completed form as an email attachment by **May 31, 2016** to the Graduate Program Assistant at **grad.edst@ubc.ca**

**Part A. To be completed by the student.**

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| --- |
| ***Current Contact Information.*** |
| **Last Name:** | **First Name**: |
| **Address**: |
| **City:** | **Province:** | **Post Code:** |
| **Home Phone:** | **Work Phone:** |
| **Email:** | **Student #:** |

|  |
| --- |
| ***Program Information.*** |
| **Current Advisor/Supervisor:** |  |
| **Research Topic:** |  |
| **Has your research supervisory committee been formed? Yes** | **No Date** (mm/yy) |
| **List your Committee members:** |  |
| **Has your research proposal been approved? Yes No Date** | **(mm/yy)** |
| **Please summarize the progress you made between May 1, 2015 and April 30, 2016 toward completing degree requirements.** |

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| ***Coursework plans for coming year.*** |
| **Please list the specific courses or types of courses you intend to take between May 1, 2016 and April 30, 2017. If coursework is completed, please leave blank. If needed, press “Enter” to produce additional lines of text.** |
| **Course Prefix & No.** | **Title or topic** |
|  |  |
|  |  |
|  |  |
|  |  |
| **Remarks:** |  |

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| ***Awards/Scholarships/Grants.* Please list any awards, scholarships or grants applied for or received between May 1, 2015 and April 30, 2016. If pending, mark “P”. Press “Enter” to produce new lines of text.** |
| **Date Applied For** (mm/yy) | **Title** | **Term (from/to)** | **Date Received (mm/yy)** | **Amount** |
|  |  |  |  | **$** |
|  |  |  |  | **$** |
|  |  |  |  | **$** |

***Other comments about your progress, plans for the coming year, or M.A. supervision:***

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**To the supervisor:** Please review the information provided in Part A, then complete Part B. To reduce paper use and facilitate data entry, please complete this form using your completer, return the completed form to the Graduate Program Assistant at **grad.edst@ubc.ca** and send a copy to the student at the email address in Part A.

**Part B. To be completed by the supervisor**

**Student’s Last Name:**

**First Name:**

**Supervisor’s Last Name:**

**First Name:**

**Date of last meeting with student:**

**Is this student making satisfactory progress toward degree completion:**

|  |  |  |
| --- | --- | --- |
| **Yes:** | **No:** | **Concerned:** |

**If “no” or “concerned”, please explain:**

**Other comments:**