

**Supervisory Committee Meeting Cover Page**

**Date Circulated:** \_\_\_\_\_ **Meeting Date:** \_\_\_\_\_

**Meeting Location:** \_\_\_\_\_

**Student Name:** \_\_\_\_\_

**Supervisor:** \_\_\_\_\_

**Committee Members:** \_\_\_\_\_

**Committee Chair:** \_\_\_\_\_

**Current Degree Program:** \_\_\_\_\_ **First Registered in MoGen (YY/MM):** \_\_\_\_\_

**Project Title:**

**Primary Research Field:** \_\_\_\_\_

**Type of meeting:** \_\_\_\_\_

**If Pre-reclassification/qualification or post TTC meeting, indicate Examination Committee member attending:** \_\_\_\_\_

**Overall Grades in Previous Committee meetings:**

1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup>	5 <sup>th</sup>	6 <sup>th</sup>	7 <sup>th</sup>	8 <sup>th</sup>	9 <sup>th</sup>	10 <sup>th</sup>

**Previous committee meeting evaluation attached in the PDF document:**

**Written Report Attached:** \_\_\_\_\_

**Note: The committee meeting report must be emailed to all committee members, including the supervisor, and the Graduate Program Administrator (Iliana Sztainbok) one full calendar week in advance of the committee meeting.**