

## DEPARTMENT OF PSYCHOLOGY QUEEN'S UNIVERSITY

**ANNUAL GRADUATE STUDENT REPORT**      Academic Year - \_\_\_\_\_

*'Criteria for Satisfactory Progress in Graduate Programmes' in Psychology can be found on the department's 'Forms' webpage at <http://www.queensu.ca/psychology/Graduate/Forms.html>. Please be aware that M.Sc. students beyond their second year of M.Sc. studies or Ph.D. students who are both beyond their fourth year of Ph.D. studies and have not submitted their dissertation for binding are placed in a status of PERMANENT REVIEW by the Graduate Committee. All registered students must complete the Annual Graduate Student Report.*

**NAME:** \_\_\_\_\_

Current Registration Status and Year (e.g., PhD 2) \_\_\_\_\_ Program: (i.e. BBCS) \_\_\_\_\_

**FINANCIAL SUPPORT**  
(for current academic year)

**SOURCE      AMOUNT**

EXTERNAL SUPPORT (OGS, NSERC, SSHRC, etc.)		
INTERNAL SUPPORT (QGF, QGA):		
RESEARCH ASSISTANTSHIP:		

TEACHING ASSISTANTSHIPS:	Fall	PSYC		
	Winter	PSYC		
	Spring/Summer	PSYC		

OTHER SUPPORT (WITHIN QUEEN'S): \_\_\_\_\_

**COURSE WORK STATUS:**

**COURSES COMPLETED** in current academic year (marks if available): Clinical students should include practicum courses

COURSE	GRADE	COURSE	GRADE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Clinical Practica Placement**

**Number of Hours**

1) _____	
2) _____	

**INCOMPLETE COURSES** from this or previous years: \_\_\_\_\_

**COMPREHENSIVE EXAMINATION STATUS:**

			AREA	DATE
Completed	Yes _____	No _____	_____	_____
Scheduled	Yes _____	No _____	_____	_____
Not Yet Scheduled	_____			

**THESIS RESEARCH STATUS**

**Program of Study :** M.Sc. \_\_\_\_\_ Ph.D. \_\_\_\_\_

**Supervisor's Name:** \_\_\_\_\_

**Committee Members:** 1 \_\_\_\_\_ 2 \_\_\_\_\_  
 3 \_\_\_\_\_ 4 \_\_\_\_\_

*Please indicate any changes in thesis committee membership in the past year.*

**Thesis Topic:** \_\_\_\_\_  
 \_\_\_\_\_

1. Proposal:	Accepted by Committee	_____	Date:	_____
	In Progress	_____	Estimated proposal date:	_____
	Not yet prepared	_____		
2. Ethics Approval:	Not yet prepared	_____		
	Submitted	_____		
	Accepted	_____		
3. Data Collection:	Completed	_____	Date:	_____
	In progress	_____	Estimated finish date:	_____
	Not started	_____		
4. Data Analysis:	Completed	_____	Date:	_____
	In progress	_____	Estimated finish date:	_____
	Not started	_____		
5. Write up:	Completed	_____	Date:	_____
	In progress	_____	Estimated finish date:	_____
	Not started	_____		
6. Oral Defense:	Completed	_____	Date:	_____
	Scheduled	_____	Estimated defense date:	_____

**COMMENTS:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

The personal information on this form is collected under the authority of the *Royal Charter of 1841*, as amended. The information will be used to process your Annual Graduate Student Report.

**PLEASE ATTACH A SEPARATE SHEET WITH THE FOLLOWING HEADERS:**

ALL PAPERS (not just this past year) DELIVERED OR PENDING FOR CONFERENCES (Include dates of conference)  
ALL PAPERS (not just this past year) PUBLISHED IN JOURNALS (INCLUDE DATE OF PUBLICATION OR ACCEPTANCE)  
ALL CHAPTERS PUBLISHED IN BOOKS OR ACCEPTED FOR PUBLICATION  
ALL PAPERS SUBMITTED TO JOURNALS BUT NOT YET ACCEPTED

INVOLVEMENT IN OTHER RESEARCH PROJECTS  
INVOLVEMENT IN PROFESSIONAL ACTIVITIES (e.g., inter-professional education, workshops, training seminars, area brown bags)  
SEPT TO AUG (current academic year)

**SUPERVISOR'S COMMENTS ON PROGRESS:**

- a) How often do you and the student meet? \_\_\_\_\_  
\_\_\_\_\_
- b) Please indicate the student's areas of strength. \_\_\_\_\_  
\_\_\_\_\_
- c) Please indicate the student's areas for improvement. \_\_\_\_\_  
\_\_\_\_\_
- d) Please comment on the student's background preparation, originality, judgment, writing and/or oral skills.  
\_\_\_\_\_  
\_\_\_\_\_
- e) Rate the student's progress (i.e., adherence to Criteria for Satisfactory Progress and to previous reports).  
\_\_\_\_\_  
\_\_\_\_\_
- f) Other comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**STUDENT'S COMMENTS ON PROGRESS:**

- a) How do you perceive your progress and your rate of career development?  
\_\_\_\_\_  
\_\_\_\_\_
- b) Please list any circumstances which you believe may have impeded your progress. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- c) How often do you and your supervisor meet? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- d) Have you and your supervisor both read and discussed this report? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**GOALS:**

In consultation with your advisor, please list your goals in your program for the next three terms (e.g., thesis proposal passed, comprehensive examination completion.) Please refer to the Criteria for Satisfactory Progress.

a) Summer \_\_\_\_\_  
\_\_\_\_\_

b) Fall \_\_\_\_\_  
\_\_\_\_\_

c) Winter \_\_\_\_\_  
\_\_\_\_\_

**Student's Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Supervisor's Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

Note: for our files it would be useful if you attached your C.V. to this report. However, please do not substitute your C.V. for any section of this report.