

THE UNIVERSITY OF BRITISH COLUMBIA

DEPARTMENT OF PHYSICS AND ASTRONOMY

PH.D. COMMITTEE REPORT

(This form is to be submitted after each meeting of the student's supervisory committee)

SUPERVISO	ORY COMMIT	TTEE MEE	TING						
Date of thi	is Committe	e Meeting	(yyyy/mm/dd):						
STUDENT IN	NFORMATIO	N							
Student Na	Student Name:					Student Number:			
Date of start of PhD Program:					Direct tran	sfer from M.S	Sc.? ye	s 🗌 no	
SUPERVISO	ORY COMMIT	TTEE							
Chair (Sup	ervisor, or <i>i</i>	Academic	Co-superviso	or):					
Research	Co-supervis	sor (if app	ropriate):						
Members:									
Members I	not present:	•							
COURSE IN	FORMATION	M /I ist all	courses taker	n during th	e student's	e araduata ca	roor)		
COURSE	CREDITS		COURSE	CREDITS		COURSE	CREDITS	GRADE	
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	_	+						<u> </u>	
		+		+					
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f PHYS 500	is not on this	s list, pleas	se explain:						
List courses	that the stud	lent plans t	to take, if know	vn:					
ANDIDACY	PROGRESS	3 (It is require	ed that all doctoral s	students be ad	mitted to candi	idacy within 36 mo	onths from the da	ite of initial	
egistration. (For d	direct transfer stu	udents, the sta	art date of the docton	toral program w	vill be the date	of initial registration	on in the master's	s program). A	
			ion of the Dean of t				-	granteu unu	
Has the student advanced to candidacy? (If not, please complete questions below)							☐ yes [no no	
Has the comprehensive exam been passed?							☐ yes [☐ no	
Is the coursework complete?							☐ yes	☐ no	
Has the thesis proposal been accepted by the committee?							☐ yes [□ no	
Recommendation for Advancement to Candidacy form submitted?							☐ yes [☐ no	

Form: PHAS-GR-003

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RESEARCH PROGRESS

Please describe briefly the student's progress during since the previous meeting. If the student has not yet advanced to candidacy, please indicate when and how the requirements will be completed. (For information
on course and program requirements please refer to www.phas.ubc.ca/graduate)

Please describe any serious reservations expressed by any member of the committee. Does the committee recommend that the student continue in the Ph.D. program? □ yes □ no THESIS PROPOSAL Please complete if the student has presented a thesis proposal at this meeting. If the thesis proposal is accepted by the committee, a copy of the proposal must be attached. ∐ yes Does the committee accept the student's thesis proposal (attached)? no **APPROVALS** Supervisory Committee Chair: Name (Please Print) Signature Date (yyyy/mm/dd) Graduate Program Advisor: Signature Name (Please Print) Date (yyyy/mm/dd) (Copies of this report are to be provided to the student and all committee members)