

## Faculty of Nursing Doctoral Program Progress Report Form

An annual report (at a minimum) must be submitted to the Graduate Coordinator by May 15. The frequency of reporting will be determined by the supervisor/advisor.

<b>Student</b>	<b>Name:</b>	<b>Number:</b>
<b>Year of entry to program</b>		
<b>Supervisor/Advisor</b>		
<b>Committee members <sup>1</sup></b>		

**Progress Summary (to be completed by student and supervisor/advisor): Students will confirm Dissertation Supervisor within the first year of study.**

Year	Term	Course/Program Requirement	Not started (indicate term/year of expected completion)	In progress	Completed (indicate term/year of completion)
One	Fall	Philosophy of Science in Nursing NURS-9100			
		Milestone – Professional development activities			
	Winter	Advanced Perspectives in Qualitative Research NURS-9300			
		Milestone – Professional development activities			
	Intersession/ summer	Graduate Level Elective Manuscript/ conference presentation			
Two	Fall	Advanced Perspectives in Quantitative Research Methods and Analyses NURS-9200			
	Winter	Comprehensive Exam NURS-9410 <sup>1</sup>			
	Spring/ Summer	Dissertation NURS-9980		*	

<sup>1</sup> Completion of NURS 9410 offers a timely opportunity to review/revise dissertation committee membership and submit for internal approval.

Three	Fall	Dissertation NURS-9980		*	
	Winter	Dissertation NURS-9980		*	
	Spring/ Summer	Dissertation NURS-9980		*	
Four	Fall	Dissertation NURS-9980		*	
	Winter	Dissertation NURS-9980		*	
	Spring/ Summer	Dissertation NURS-9980		*	

**LOA: Semester/Year** (e.g Fall/2000) \_\_\_\_\_

\*Report process steps (dissertation proposal development, including any decisions to revise the original approved dissertation proposal, supportive rationale and date of approval reached by all dissertation committee members, chapters written/revise, defense date)

**A. To be Completed by the Student:**

1. Reflect on accomplishments in the program over the past year (publications, presentations, grant applications, conference attendance etc.). Use supplementary paper if necessary.

2. List goals for the upcoming \_\_\_\_\_ months.

**B. To be Completed by the Supervisor/Advisor:**

3. Supervisor/Advisor comments regarding student progress toward academic goals.

Progressing without concern:  Yes  No

**C. Graduate Coordinator Notes:**

Signature of Student: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Supervisor/Advisor: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Graduate Coordinator: \_\_\_\_\_ Date: \_\_\_\_\_