

**GRADUATE DEPARTMENT OF PHARMACEUTICAL SCIENCES  
ADVISORY COMMITTEE ASSESSMENT FORM**

Student Name: \_\_\_\_\_ Student Number: \_\_\_\_\_ Date: \_\_\_\_\_

Research Topic: \_\_\_\_\_

Committee Chair: \_\_\_\_\_  
PRINT NAME SIGNATURE

**The Committee Chair CANNOT be the Supervisor or the Co-Supervisor.**

Supervisor: \_\_\_\_\_  
PRINT NAME SIGNATURE

Co-supervisor: \_\_\_\_\_  
PRINT NAME SIGNATURE

Internal Member: \_\_\_\_\_  
PRINT NAME SIGNATURE

External Member: \_\_\_\_\_  
PRINT NAME SIGNATURE

\_\_\_\_\_  
PRINT NAME SIGNATURE

**Process for Student Assessment:**

1. Review the Departmental policies on Advisory Committees (as required).
2. Review the following academic record of the student (to be completed by student):

Graduate Program: MSc PhD

Current Status: FT PT Flex Direct Entry/Transfer

a) Date of first registration in program: \_\_\_\_\_

b) Estimated completion date: \_\_\_\_\_

c) Date of last Advisory Committee Meeting: \_\_\_\_\_

d) Date of last presentation in the Student Group Seminar: \_\_\_\_\_

e) Date(s) of GRIP presentation(s): \_\_\_\_\_

f) Departmental minimum course work completed: Yes No

**Please submit the completed and signed form to the graduate office (Room 658,  
pharm.sci@utoronto.ca) immediately following the meeting.**

3. Committee's assessment of the student's progress, abilities and proposed work (to be discussed with the student).

| Criteria   | Good | Satisfactory | Weak* | Inadequate Opportunity to Observe | Comments |
|--|------|--------------|-------|-----------------------------------|----------|
| a) Technical skills  |      |              |       |                                   |          |
| b) Knowledge of relevant literature and methods                    |      |              |       |                                   |          |
| c) Design of the project   |      |              |       |                                   |          |
| d) Problem solving   |      |              |       |                                   |          |
| e) Critical analysis/interpretation                                |      |              |       |                                   |          |
| f) Originality/Creativity  |      |              |       |                                   |          |
| g) Industry  |      |              |       |                                   |          |
| h) Self-reliance   |      |              |       |                                   |          |
| i) Communication skills: Oral                                      |      |              |       |                                   |          |
| Written  |      |              |       |                                   |          |
| k) Interaction with others in the research group (supervisor only) |      |              |       |                                   |          |

*\*Provide specific suggestions for improvement for any areas identified as weak.*

The information on this form is confidential and will not be used for any other purposes, i.e. reference letters, ranking for scholarships.

4. Is the student making sufficient progress?                      Yes                      No

5. Recommendations for further development of the thesis research.

6. Recommendation for proceeding:

The student:

- a) May proceed as per 3 and 4 above;
- b) May proceed to Qualifying Examination (PhD only)  
**Note:** PhD students must pass this examination within the first 24 months of initial registration if Full-time or within the first 32 months of registration if Flex-time. Exams should be scheduled early enough to permit the student time to re-take it if necessary. Failure to pass this exam within the required time limit would normally result in termination from the program.
- c) May proceed to Transfer Examination (MSc only)  
**Note:** MSc students wishing to transfer to the PhD program must pass this examination within 15-18 months of initial registration.
- d) No further experiments or data collection and analysis necessary. Focus on writing the thesis;
- e) May proceed to Defense;
- f) Has not demonstrated adequate progress. Failure to demonstrate satisfactory progress by the next Advisory Committee Meeting may result in termination of registration;
- g) Has not demonstrated adequate progress. Registration in the program should be terminated. The reasons for this recommendation will be forwarded to the Graduate Chair.

7. The Advisory Committee should meet in the next:

3 months

6 months

12 months

Tentative Date: \_\_\_\_\_

**FOR THE STUDENT:**

8. Student Comments/Response to Recommendations

The Chair conveyed the discussion and recommendations of my Advisory Committee to me directly following the meeting.

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

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