

**PH.D. COMMITTEE REPORT**

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

SUPERVISORY COMMITTEE MEETING**Date of this Committee Meeting** (yyyy/mm/dd): 2024/09/19**STUDENT INFORMATION****Student Name:** Cassidy Northway**Student Number:** 33726126**Date of start of PhD Program:** Sept 2020**Direct transfer from M.Sc.?** ☐ yes ☒ no**SUPERVISORY COMMITTEE****Chair (Supervisor, or Academic Co-supervisor):** Dr. Ingrid Spadinger**Research Co-supervisor (if appropriate):****Members:** Dr. Andrea Lo, Dr. Tony Popescu, Dr. Arman Rahmim, Dr. Stefan Reinsberg**Members not present:****COURSE INFORMATION (List all courses taken during the student's graduate career)**

COURSE	CREDITS	GRADE	COURSE	CREDITS	GRADE	COURSE	CREDITS	GRADE

If PHYS 500 is not on this list, please explain:

List courses that the student plans to take, if known:

CANDIDACY PROGRESS (It is required that all doctoral students be admitted to candidacy within 36 months from the date of initial registration. (For direct transfer students, the start date of the doctoral program will be the date of initial registration in the master's program). A student who is not admitted to candidacy within this time period will be required to withdraw from the program. Extensions may be granted under exceptional circumstances and with the permission of the Dean of the Faculty of Graduate and Postdoctoral Studies.)

Has the student advanced to candidacy? (If not, please complete questions below)	<input checked="" type="checkbox"/> yes	<input type="checkbox"/> no
Has the comprehensive exam been passed? <input checked="" type="checkbox"/> written <input type="checkbox"/> oral	<input checked="" type="checkbox"/> yes	<input type="checkbox"/> no
Is the coursework complete?	<input checked="" type="checkbox"/> yes	<input type="checkbox"/> no
Has the thesis proposal been accepted by the committee?	<input checked="" type="checkbox"/> yes	<input type="checkbox"/> no
Recommendation for Advancement to Candidacy form submitted?	<input checked="" type="checkbox"/> yes	<input type="checkbox"/> no

**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 [graduate programs](#))

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.

Does the committee accept the student's thesis proposal (attached)? ☐ yes ☐ no

APPROVALS

Supervisory Committee Chair:

_____ Signature	_____ Name (Please Print)	_____ Date (yyyy/mm/dd)
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Graduate Program Advisor:

_____ Signature	_____ Name (Please Print)	_____ Date (yyyy/mm/dd)
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(Copies of this report are to be provided to the student and all committee members)