

**BROCK UNIVERSITY**  
**FACULTY OF APPLIED HEALTH SCIENCES**  
**Appendix B: MA/MSc Student Progress Report**

All MA/MSc graduate students must complete and submit this report electronically to the AHS Graduate Administrative Coordinator at [ahsgradstudies@brocku.ca](mailto:ahsgradstudies@brocku.ca) .

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**Student Name:**

**Student Number:**

**Program:**

**Entry Date (month/year):**

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**Advisory Committee (provide email for non-Brock faculty)**

Supervisor:

Member:

Member:

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**Course Requirements and Grades**

Required Course: AHSC 5N01 – Grade (circle as appropriate): PASS FAIL

Research Methods:

Elective 1:

Elective 2:

Elective 3:

Date coursework completed:

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**Thesis Proposal**

Thesis Proposal Title:

Date of Proposal Defence:

Committee Members Present:

Proposal Approved: Result (circle as appropriate): PASS FAIL

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**Ethics Review(s) (circle as appropriate)**

Human Ethics Review Required:    Yes    No

Animal Protocol Review Required:    Yes    No

BioHazard(s) Review Required:    Yes    No

Date Ethics Approval received:

Protocol Number:

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**Thesis Progress**

Date Data Collection begun:

Date Data Collection complete:

Date Data Analysis complete:

Date First Draft of Thesis submitted to Supervisor:

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**Committee Approval of Thesis for Defence**

Date of Meeting:

Supervisor submits the Appointment of External Examiner Form-Thesis is Ready for Defence:

Thesis Defence Date:

Approved External Examiner:

Chair of Defence:

Defence Results: Result (circle as appropriate): PASS FAIL

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**FOR OFFICE USE ONLY**

Advisory Committee Approval:

Proposal Approved:

Date Thesis Corrections Completed (email with Supervisor's approval & final thesis):

Program Completion:

Comments: