**Annual Progress Report for Ph.D. Students in Sociology**

This form must be completed each academic year for all students in the Ph.D. program. Students in year one should complete as much of the form as possible. The student should fill in the first page, and after Part B is completed, s/he may respond (and must sign) in Part C. Where s/he has not yet designated a supervisor and committee, the principal advisor should complete Part B. In other cases, the supervisor should complete Part B to reflect a consensus among committee members, arrived at in conjunction with a meeting between student and committee. The report should be signed by all parties before returning it to the Graduate Office.

**Part A (to be completed by student)**

**Personal Information**

Name: ___________________________  
Student Number: ___________________________

Major Area: _______________________
Date of First Registration in Ph.D. Program: ______________

E-Mail: ___________________________  
Signature: __________________________

**Hours Worked** Please list the number of RA and TA hours worked from September 1 to April 30 plus hours expected to work from May 1 to August 31.

TA Hrs: _____________  
RA Hrs: _____________  
External Hrs Worked: _____________

**Courses** Attach ROSI printout. Course work is expected to be complete by end of Year 2.

Check here if all coursework has been completed (continue to Comp Exam section): ☐

**Courses Completed:**

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<th>Course Name and Number</th>
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**Sociology UNIVERSITY OF TORONTO**
Courses Remaining:
Required Courses

Optional Courses

If all coursework is not complete by the end of year 2, please indicate the reason here:

Practicum This section is for those students entering year 2 only.

Practicum advisor: __________________________ Signature: __________________________

Comprehensive Exams Comprehensive Exams are expected to be complete by end of Year 2.

First Comprehensive Exam:
Completed: Yes ☐ Area: ___________________________ Date Completed: ________________
No ☐ Anticipated Date of Completion: ___________________________

Second Comprehensive Exam:
Completed: Yes ☐ Area: ___________________________ Date Completed: ________________
No ☐ Anticipated Date of Completion: ___________________________

Thesis Proposal Thesis Proposal should be defended and approved by end of Year 3.

Completed: Yes ☐ Title: __________________________________________________________
Date Completed: __________________________________________________________

If your title changed after you completed the thesis proposal, please include updated title: ___________________________

No ☐ Proposed Title: __________________________________________________________
Anticipated Date of Completion: ____________________________________________

Ethics Review (for human subjects) Required:

Yes ☐ Date Approved: _________________________________________________________

No ☐
Supervisory Committee: SGS time limit for constituting supervisory committee is by end of Fall in Year 2. Addition of a committee member outside the University of Toronto must be approved by the Grad Office as well as the Chair of the Department. Approval will not be granted until the thesis proposal defense is completed successfully.

Advisor Name (if applicable): ____________________________

Supervisor Name: _________________________________

Formally Agreed: Yes ☐ No ☐

Committee Member Name: ______________________________

Formally Agreed: Yes ☐ No ☐

Committee Member Name: ______________________________

Formally Agreed: Yes ☐ No ☐

If a Committee Member is not associated with UofT please provide a full CV and letter from your supervisor indicating the particular expertise of this member and what measures were taken to ensure this position could not be filled by faculty at the University of Toronto (Requires approval by Department’s Graduate Chair and the Provost):

Name: ______________________________________________ E-Mail: ________________________________

University: ________________________________________

Has the entire committee met together in the past academic year?

Yes ☐ No ☐ Date: _______________________________________

Professional Activity: Include all activity in the past year (May 1 – April 30)

Conference Presentations: (provide title, authors, conference name and date)
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
Papers Accepted and/or Forthcoming: (list title, authors, date published/forthcoming and journal name/book title)

Manuscripts Submitted for Review: (list title, authors, date submitted, journal name/book title - only list things under review)

Summary

Provide a brief report below on the progress you have made toward completion of your program over the past academic year:

Part B (to be completed by Supervisor/Advisor)

Once a thesis committee is formally constituted, it must meet with the student at least once per year. A discussion of progress should be a component of such a meeting, and this form should be filled out in conjunction with it.

Where applicable, student progress should be assessed on the following:

Courses Expected to be complete by end of Year 2.

Overall progress, considering year in Ph.D., is: □ Satisfactory □ Unsatisfactory

Comments/Concerns:

Development of Thesis Ideas and Proposal Thesis proposal should be defended and approved by end of Year 3.

Overall progress, considering year in Ph.D., is: □ Excellent □ Very Good □ Satisfactory □ Unsatisfactory

Comments/Concerns:
Thesis Research

Percentage of research complete? ___________

Quality of Thesis Research:  □ Excellent □ Very Good □ Satisfactory □ Unsatisfactory

Comments/Concerns:

Thesis Writing

Percentage of writing complete? ___________

How many draft chapters (out of total) complete? ______

Quality of draft material:  □ Excellent □ Very Good □ Satisfactory □ Unsatisfactory

How close to end product (as %): ___________  Expected date of completion? ________________

Comments/concerns:

Signatures

Supervisor  ___________________________  Date _________________

Committee member  ___________________________

Committee member  ___________________________

Part C (to be completed by Student)

Response to Part B (Optional):

Signature:  Student  ___________________________  Date _________________

This report is to be filed with the Graduate Office, with a copy made available to the student and each member of the committee upon request.

Part D (to be completed by Associate Chair - Graduate)

The Graduate Program Office will consider the report received from the committee and will inform students/committee if there are concerns about progress.

Signature:  ___________________________  Date _________________