

**Department of Biomedical Engineering**  
**Report of Supervisory Committee Meeting**

*(to be filled in and signed at the time of the meeting and return to Graduate Coordinator)*

Name of Student: \_\_\_\_\_ Date of Committee Meeting: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

Members of supervisory committee (Note any changes):  
Name: \_\_\_\_\_ Department \_\_\_\_\_

**Performance of student:**

**Type of Meeting:**

Was a written report submitted by the student to committee members in advance of the meeting?  
Yes \_\_\_\_\_ No \_\_\_\_\_

Supervisory Committee  
Thesis Proposal Evaluation

General performance of student at the meeting:

\_\_\_\_\_ excellent \_\_\_\_\_ very good \_\_\_\_\_ good \_\_\_\_\_ satisfactory  
\_\_\_\_\_ unsatisfactory

Specific suggestions for improvement and comments regarding progress to be added by the supervisor (use additional sheets if necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

We, the members of the supervisory committee, concur with the contents of this report.

Signatures: \_\_\_\_\_  
\_\_\_\_\_

To be signed by the student, signifying that s/he has read this report.

\_\_\_\_\_