THE UNIVERSITY OF BRITISH COLUMBIA

DEPARTMENT OF PATHOLOGY AND LABORATORY MEDICINE

# Supervisory Committee –Thesis Report

\*Please use one form per Committee Member\*

Name of Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title of Thesis: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| acceptable | needs revision |
| 1. Understanding of the topic |  |  |
| 2. Research methodology |  |  |
| 3. Evaluation of results |  |  |
| 4. Validity of conclusions |  |  |
| 5. General organization and literacy |  |  |
| Comments/Suggestions for improvement: | | |

Verification (Please check one box)

( ) **PhD**: This thesis is now ready for transmission to the Doctoral External Examiner

( ) **PhD:** This thesis should not be submitted to the Doctoral External Examiner until

revisions have been made.

( ) **MSc:** This thesis is now ready for defense

( ) **MSc:** This thesis is not ready for defense until revisions are made

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| Signed |  |  |
|  | Signature | Print Name |

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return this form to Grad Studies Program Assistant: [aabdulla@pathology.ubc.ca](mailto:aabdulla@pathology.ubc.ca)

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