Department of Psychology
Second-Year Research Project (SYRP)
Progress Report

Student’s Name: ________________________________

Date of Oral Examination: ______________

Members of the Examining Committee
1. ________________________________ (Supervisor)
2. ________________________________ (Member of Supervisory Committee)
3. ________________________________ (Member of Supervisory Committee)
4. ________________________________ (Additional Member)
5. ________________________________ (Optional Additional Member)

Decision of the Examining Committee

___ Unanimous agreement that the project has completed successfully
___ Majority agreement that the project has completed successfully
___ Unanimous not agreement that the project has completed successfully
___ Majority not agreement that the project has completed successfully

Signature of Supervisor: ________________________________

Signature of Student: ________________________________

Please complete this form as soon as possible and submit it to the Associate Chair for Graduate Studies, along with a final copy of the project report. Thank you.