HTH SCI PROJECT GRADE SUBMISSION

END OF TERM EVALUATION

*Due mid-December (T1) and mid-April (T2)

COURSE (PLEASE CHECK ONE)

- [ ] 3H03
- [ ] 3H06
- [ ] 3BM3
- [ ] 3BM6
- [ ] 4D03
- [x] 4W03

STUDENT NAME: ____________________________

STUDENT #: ____________________________

PROGRAM (PLEASE CHECK ONE): [ ] BSc CORE [ ] CHS [ ] GHS [ ] BMS [ ] OTHER

LEVEL (PLEASE CHECK ONE): [ ] LEVEL 2 [ ] LEVEL 3 [ ] LEVEL 4

TERM (PLEASE CHECK ONE): [ ] FALL TERM [ ] WINTER TERM [ ] BOTH TERMS [ ] SPRING/SUMMER

PROJECT STATUS:

- [ ] PROJECT COMPLETE: complete Sections A & C of this form
- [ ] PROJECT INCOMPLETE: complete Sections A, B & C of this form

SECTION A: EVALUATION CRITERIA

<table>
<thead>
<tr>
<th>Evaluation Criteria</th>
<th>Evaluated by</th>
<th>Completed Y/N?</th>
<th>Weight/100%</th>
<th>Mark/100</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-Evaluation</td>
<td>(*must be reviewed and signed by supervisor)</td>
<td></td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

TOTALS: /100% /100

LETTER GRADE FOR WORK COMPLETED TO DATE:
(if project work is incomplete)

FINAL LETTER GRADE:
(if project work is complete)

*NOTE FOR COMPLETED PROJECT COURSE: A SELF EVALUATION MUST be included in the evaluation criteria (1 page written reflection). The supervisor MUST review this with the student upon final evaluation and SIGN the page. THIS COMPONENT IS MANDATORY AND WILL NOT CONTRIBUTE TO THE FINAL GRADE.

FOR OFFICE USE ONLY

Comments

DATE GRADE ENTERED: ____________________________
### SECTION B: INTERIM EVALUATION OF INCOMPLETE PROJECTS

<table>
<thead>
<tr>
<th>What remains to be completed?</th>
<th></th>
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<th>What is the anticipated timeline for completion?</th>
<th></th>
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<table>
<thead>
<tr>
<th>If you are unable to provide an anticipated timeline for completion, please explain.</th>
<th>Append additional pages if necessary.</th>
</tr>
</thead>
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Do you wish to nominate this student for a University Prize for Special Achievement?  
If so, please describe how the student has demonstrated exceptional skill and originality in this project.

### SECTION C: SIGNATURES

<table>
<thead>
<tr>
<th>SUPERVISOR NAME:</th>
<th>SUPERVISOR SIGNATURE:</th>
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<table>
<thead>
<tr>
<th>SUPERVISOR EMAIL:</th>
<th>DATE:</th>
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</thead>
</table>

*Please submit this form (in a sealed envelope and signed on the flap by the supervisor) to the BHSc office, MDCL/3511.  
**If you would like a copy of your evaluation, please obtain it from your supervisor.