

**Documentary Media (MFA): Year Two Progress Review**

\*Reporting on progress in previous term

Term (previous term)

<b>Name:</b>	<b>ID #:</b>	<b>First Term Enrolled:</b>
--------------	--------------	-----------------------------

Course Number	Course Title	Course Type	Term Taken or to be Taken	Completed ✓
DM8102	Documentary Studies I	Required	Fall / Year 1	
DM8103	Documentary Studies II	Required	Winter / Year 1	
DM8215	Production I	Required	Fall / Year 1	
DM8216	Production II	Required	Winter / Year 1	
DM8108	Research Methods	Required	Winter / Year 1	
DM8225	Master's Project Development I	Required	Winter / Year 1	
DM8226	Master's Project Development II	Required	Spring / Year 1	
DM8235	Masters Project Production I	Required	Fall / Year 2	
DM8236	Master's Project Production II	Required	Winter / Year 2	
DM8905	Professional Perspectives in Documentary	Required	Fall / Winter /Year 2	
DM Series	Doc Media Advanced Theory Elective (1 selected from group)	Elective	Fall / Year 2	
CD series	Interdisciplinary /Comm & Design Elective (1 selected from group)	Elective	Winter / Year 1	

**Any Incomplete (INC) Grade(s) in the last term?** If yes, fill in the name of the course, reason for the INC and date outstanding work is due.

DM\_\_\_\_\_ Reason:\_\_\_\_\_ Deadline:\_\_\_\_\_

**Other information**

Financial Assistance received last term: TA <input type="checkbox"/> / RA <input type="checkbox"/> / Marker <input type="checkbox"/>	Hourly Rate	Total # of Hours:
Other (please specify): _____		

**Progress to date:** (Report on your progress to date referring to any term objectives that you may have set in the previous term)

**Objectives For Next Term:** (Outline your proposed research objectives/ methodologies/ milestones.)

**Student's Comments:** (Please include anything that you feel should be brought to the attention of the Program Director or any cause of delay which has prevented you from proceeding as expected.)

<b>Capstone</b>	<b>Supervisor is satisfied with end of term MRP draft</b>	<b>Fall / Year 2</b>	Signature	date
<b>Capstone</b>	<b>Supervisor is satisfied with end of term MRP progress</b>	<b>Winter / Year 2</b>	Signature	date

**Faculty Supervisor Comments:**

	<b>Signature</b>	<b>Date</b>
<b>Student</b>		
<b>Faculty Supervisor</b>		

**Program Director Comments**

<b>Program Director</b>		
-------------------------	--	--

**Please return the completed and signed Report to the Graduate Program office by uploading the signed copy to: [torontomu.ca/docmedia-upload](http://torontomu.ca/docmedia-upload)**