First & Last Name:

Please indicate:

Please indicate:

HS EDUC 707: Residency Week 2 Complete Capstone Portfolio/Thesis Defense

McMaster Student Number:

Program Start Date: Fall 2024

I plan to complete the Program by:

Faculty of Health Sciences David Braley Health Sciences Centre 5th Floor, Room 5003 100 Main Street West Hamilton, ON Canada L8P 1H6 Tel: 905.525.9140 Ext 26798 Fax: 905.572.7099 Email: hsed@mcmaster.ca http://hsed.mcmaster.ca

HSED Program Plan – Fall 2024 Incoming Students

Required Courses:											
0											
Elective Courses:											
 HS EDUC 704 – The Fundamentals of Simulation-based Education (Winter) HS EDUC 705 – Educational Technology for Higher Education (Fall) HS EDUC 706 – Leadership & Management in the Health Professions (Spring/Summer) HS EDUC 710 – Program Evaluation in Health Professions Education (Winter) HS EDUC 712 – Critical Pedagogies and Inclusive Teaching Practices (Spring/Summer) See HSED Student Handbook for pre-approved elective courses outside the HSED Program Indicate when you plan to complete each requirement by placing an "x" in the appropriate cell.											
Curr	icular Requirement	F24	W25	SS25	F25	W26	SS26	F26	W27	SS27	Later
Required: HS EDUC 701											
Required: HS EDUC 703											
Elective 1:											
Elective 2:											
Elective 3:											
	tone Milestones <i>plicable)</i>										

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Course-based Students ONLY

- 1. I intend to complete my Capstone Portfolio:
- 2. Remember, you must attend HS EDUC 707: Residency Week 2 in the summer *preceding* your last year in the HSED Program (so before you complete the final Capstone submission). However, you must also complete all 10 Capstone Education Proposal Milestones prior to attending Residency Week 2. With this in mind, when do you plan to attend Residency Week 2?

Spring/Summer of:

Thesis-based Students ONLY

1. I intend to complete my thesis by:

- My thesis supervisor is:
 My Supervisory Committee includes: and
 Can you provide details (e.g., topic, methodology) about your thesis at this time?
 If "Yes," please provide details:
- 5. My research will be funded by:

PLEASE ENSURE YOU SAVE THIS FORM BEFORE CLOSING MICROSOFT WORD

Rename the file to "FirstNameLastName_HSEDPRogramPlan-June2024" (e.g., ShayanNovin HSEDProgramPlan-June2023).

Submit a completed copy of the form to hsed@mcmaster.ca by the designated deadline.