ANNUAL RESEARCH ADVISORY COMMITTEE MEETING

Student’s Name_________________________________ Mentor______________________________________

Date of Research Committee Meeting __________________________20_____

Progress of Thesis: □ Satisfactory □ Unsatisfactory

USE BACK OF FORM FOR ADDITIONAL SPACE

Recommendations of the committee:

Research goals to be met before next committee meeting:

Are experiments well-designed and generating or likely to generate useful data that will contribute to an acceptable thesis?

Are there significant technical or other problems that might interfere with the student’s progress over the next year?

Student’s strengths and weaknesses:

Please comment on the following. If student needs improvement, please specify how.

Work ethic: □ Satisfactory □ Needs Improvement ____________________________________________________________

Scientific curiosity: □ Satisfactory □ Needs Improvement ____________________________________________________

Ability to think independently: □ Satisfactory □ Needs Improvement __________________________________________

Laboratory skills: □ Satisfactory □ Needs Improvement ______________________________________________________

Communication skills: □ Satisfactory □ Needs Improvement __________________________________________________

Has the student published papers and/or is the work likely to lead to first author publications? __________________

Has the student applied for any pre-doctoral awards or fellowships? _________________________________________

Has the student presented at any scientific meetings? ________________________________________________________

What are the student’s future career plans? __________________________________________________________________

Comments of student (optional): ________________________________________________________________________

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Committee Name (please print) Signature Concur Dissent

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Student Signature Anticipated thesis defense date

_______________________________________  ___________________________________20____

Program Director Signature Associate Dean Signature