

ANNUAL GRADUATE STUDENT EVALUATION FORM

Form: GPC-6a (11/00)

Name of Student: _____ Date: _____

Name of Major Advisor: _____ Period: SS through Spring

I. TO BE FILLED OUT BY STUDENT:

a. Current number of semesters (EXCEPT SS) into Program of Study: _____

b. Courses in which you enrolled during this report period: # Credit hours Grade Obtained

<u>Courses in which you enrolled during this report period:</u>	<u># Credit hours</u>	<u>Grade Obtained</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

c. Courses audited

d. Teaching Assistant service: List course(s) # contact hrs. # prep hours

_____	_____	_____
_____	_____	_____

e. Title, date and location of formal presentations (Posters, papers at meetings, seminars, journal clubs, etc.):

f. Number of seminars attended not covered by any of the above:

g. Publications (papers, abstracts, etc.) published or in press:

h. Scientific Meetings attended (name, date, location):

Student's Signature: _____

Date

II. TO BE COMPLETED BY THE MAJOR (THESIS) ADVISOR:

a. Performance of the student in the research laboratory was:

Excellent Good Fair Poor

b. Comments (may be furnished as a separate letter* to the G.P.C.):

c. The research progress made is / is NOT sufficient for the student to complete the research goals as outlined in the Program of Study in the proposed time [if not, briefly describe the reason and steps taken to improve the research progress of the student (may be furnished as a separate letter*)]:

d. The student has completed all courses as listed in the Program of Study for the current year:

YES NO (give explanation*)

* all letters or other written comments **MUST** be attached and available to the student.

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e. The student has completed any other requirements for this year as outlined in the Program of Study:

YES NO (give explanation*)

f. Overall, the student is on schedule as outlined in the Program of Study:

YES NO (give explanation*)

g. The student **is / is not** in academic difficulty and **NO / THE FOLLOWING** action should be taken:

* all letters or other written comments **MUST** be attached and available to the student.

III. TO BE COMPLETED BY THE COURSE DIRECTOR OR LABORATORY DIRECTOR:

a. Performance of the student as TA in the above listed course(s) was

Excellent Good Fair Poor

b. Comments (may be furnished as a separate letter* to the G.P.C.):

Signature of Course /
Laboratory Director: _____ Date _____

Signature of Advisor: _____ Date _____

I have read the information above, including attached explanations and/or explanation letters, and I understand the implications. My signature indicates having read the above but does not necessarily signify agreement with the information.

Signature of Student: _____ Date _____

Student Comments, if any:

* all letters or other written comments MUST be attached and available to the student.