

ISSTBE PhD Program - Graduate Student Annual Evaluation Form

SECTION 1 (TO BE COMPLETED BY STUDENT)

Name of student: _____

Please check metrics that have been successfully completed:

- | | | |
|--|--------------------------|---|
| Preliminary Exam | <input type="checkbox"/> | |
| Course Work (Core+ Concentration + Specialization) | <input type="checkbox"/> | |
| Comprehensive Exam (Dissertation Proposal) | <input type="checkbox"/> | Term & Yr passed _____ |
| Peer-reviewed Journal Publications | <input type="checkbox"/> | If so, how many 1 st author? _____
How many other publications? _____ |
| Patent Applications/Issued Patents | <input type="checkbox"/> | If so, how many? _____ |

Please list any additional activity not listed above that has been achieved in the past year:

Please comment on your progress towards your degree (comparing to the program's recommended timeline). If you are in doctoral candidacy for more than 1 year, then please include your intended dissertation completion term and year.

SECTION 2 (TO BE COMPLETED BY RESEARCH ADVISOR ON BEHALF OF ALL CO-MENTORS)

Rate your student's progress toward their degree (circle one):

Excellent Good Satisfactory Fair Unsatisfactory

Please comment on the student's progress towards their degree over the past year. Use the program's recommended timeline as a reference. If a milestone has been missed, include the term and year of the intended completion of the milestone. Also include the student's strengths & areas for improvement in your comments.

Signature of Student

Date

My signature below attests to having reviewed the contents of my evaluation with the student.

Signature of Research Advisor

Date

Please email a copy of this document along with the student's current flight plan to the PhD Program Directors and retain the original for your records.

