



PhD Student Committee Review

The information you share will be invaluable to the college as we continue to work on program improvement, accreditation, and compliance. This information will only be shared in an anonymous, aggregated format.

All students need to complete the review electronically. First and second year graduate students may complete this form to the best of their ability with their PI only, as many will not have committees formed during this time. Years three and up are required to complete the form in its entirety and have their entire committee sign the review. You are encouraged to hold committee meetings as needed but are required to hold at least one per year.

*After all signatures have been collected, this review must be submitted to the Office of Graduate Studies **by May 15 of each year.***

Date of Review: _____

Student Information

Name:					
Committee Chair:					
First Term Attended:			Estimated Graduation Date:		
Completion Date	Degree Plan:	Prelim:	Proposal:	All Coursework:	Final Thesis/Dissertation:
What are your career goals after graduation?					

Tentative Thesis/Dissertation title:	
Current status:	
Committee Members	Chair:
	Co-chair:
	Members:

Coursework Completed Since Last Review		
Semester	Course	Grade

Research Summary		Chair Comments
Research Interest and Goals:		
Research Activities:		

Research Plans for Coming Year: (Please indicate what specific activities you hope to accomplish, including writing research, etc.)		Chair Comments
Project 1:		
Project 2:		
Project 3:		

Manuscripts in progress: (give tentative title and co-authors)	Chair Comments
Talk/Paper Presentations to date:	Chair Comments
Poster Sessions to date:	Chair Comments
Publications To Date: (Provide complete references of all your publications to date; include papers that are under review, and where they were submitted)	Chair Comments

Awards/Grants RECEIVED since you started: (Please summarize all grants, fellowships and/or awards you have received up to May 1st and/or have received since. You may include any tuition remission or travel funds received from the dept.)

	Funding Source	Amount	Date submitted (semester/year)	Topic/Title	Status (funded, not funded, or under review)
1					
2					
3					

Student Comments/Suggestions for Future Courses, Professional Training Opportunities, Etc.

Chair Evaluation of Student's Committee Presentation

<i>How well does the student meet your expectations in the following areas?</i>	Exceeds	Meets	Below	Not Obs.
Structure- Presentation is interesting, well-organized, & sequenced.				
Audience- Holds audience attention and fluidly responds to cues & questions.				
Delivery- Proper vocal intonation, elocution, volume & register.				
Content- Appropriate grasp of topic & comfortable providing elaboration.				

Chair Overall Evaluation

<i>How well does the student meet your expectations in the following areas?</i>	Exceeds	Meets	Below	Not Obs.
Exhibits a coherent understanding of discipline-specific knowledge				
Applies discipline-specific knowledge in a range of context to solve problems				
Uses a variety of sources & evaluates multiple points of view to analyze & integrate info				
Communicates effectively				
Teaches or explains the subject matter in their discipline to a broad range of audiences				
Exhibits proficiency in technology appropriate to solve problems in their discipline				
Chooses ethical courses of action in research and/or practice				
Develops clear, hypothesis-driven research plans				
Conducts valid, data-supported and theoretically consistent research				
Effectively disseminates research results in appropriate contexts				

Chair Comments/Suggestions For Future Courses, Professional Training Opportunities, Etc.

Overall Score: _____/100

100 ----- 75 ----- 50 ----- 0
Exceeds Expectations Meets Expectations Below Expectations Dismissed

*We have discussed this evaluation and have a plan for continued improvement.
Please type name/date in the box and sign on the line*

_____	_____	_____
Student Name	Student Signature	Date
_____	_____	_____
Faculty Chair Name	Faculty Chair Signature	Date
_____	_____	_____
Committee Member Name	Committee Member Signature	Date
_____	_____	_____
Committee Member Name	Committee Member Signature	Date
_____	_____	_____
Committee Member Name	Committee Member Signature	Date

Committee Comments