Name:
Student ID:
Date:
Term/Year:

Student:         Advisor:

Signatures:  _______________________   _______________________

Thesis Title:

Specific aims:

Committee Members (names and signatures)

1.   ______________________

2.   ______________________

3. (optional)   ______________________

Rate the student’s progress on the following parameters of his/her thesis project:
1= exceptional, 2= satisfactory, 3= minimal, 4= no progress

Quality of benchwork:
Quantity of benchwork:
Level of understanding of project:
Awareness of the literature:
Work ethic:
Progress on original specific aims:
Others (write in)

Comments:

Comment on student’s strengths or improvements over past semesters:

Comment on student’s weaknesses or declines compared to past semesters:

If the student continues at rate of progress, will he/she likely complete the thesis within a total 2 year time frame? ___Probably _____Possibly ____Not likely

I certify that this student has averaged approximately ___ hours per week working in the lab this semester ___________________________ (Advisor)