

Graduate Student Evaluation - End of Year Assessment

Please fill in the top portion of this form and then give it to your advisor/chair. The advisor/chair will fill in the overall assessment portion of this form.

TO BE COMPLETED BY STUDENT:

Student: _____

Thesis / Dissertation Director/Advisor: _____

Year _____ **MA** **PhD**

Paperwork: circle all that have been filed:

MA

Program of Study

Thesis Committee

Topic Form

Concurrent Enrollment

Summer Field Experience

PhD

Research Skills

Program of Study

Committee Form

Comprehensive Exam Verification

Qualifying Exam Verification

Credit hours completed _____

Committee members (In addition to chair):

1. _____ 2. _____

3. _____ 4. _____

Thesis / Dissertation Topic:

| |
|--|
| |
|--|

Qualifying Exams

Date Completed: _____

Comprehensive Exams

Date Completed: _____

Public presentations given:

Conference papers:

Publications:

Other Activities:

TO BE COMPLETED BY ADVISOR / CHAIR

Overall Assessment:

| |
|--|
| |
|--|