

Appendix 7. Annual Review Form to be completed by Major Advisor and Student’s Graduate committee. Due July 15th.

Annual Review

Candidate Name:

Year Program Began:

Current Year:

Check list	Does not meet expectations	Meets expectations	Exemplary performance	N/A
1. Problem definition				
2. Literature knowledge				
3. Approach				
4. Results				
5. Quality of written communication				
6. Quality of oral presentation				
7. Critical thinking				
8. Publications				

N/A = Not Applicable

Comments:

_____ Student Signature	_____ Date	_____ Advisor Signature	_____ Date
_____ Committee Member	_____ Date	_____ Committee Member	_____ Date
_____ Committee Member	_____ Date	_____ Committee Member	_____ Date