

Supervisory Committee Meeting Report

As per instructed in the BMS Student Handbook, this form is intended to be completed a minimum of once annually, no later than March of any academic year.

Student Name: _____ **Email:** _____

Degree Program (select one): **PhD in Biomedical Sciences** **PhD in Neuroscience**

Date Entered PhD Program: _____

Date of Committee Meeting: _____

Committee Report: Is the student making satisfactory progress towards degree: YES/NO (circle one)

Please provide strengths and areas for improvement in the following areas and, where relevant, any additional areas that can help the student progress.

1. Coursework including timeline for completion:

2. Acquisition of laboratory methods and expertise:

3. Understanding of the literature in the field:

4. Data collection, analysis, and publication:

5. Progress on qualifying exams:

6. Goals, as determined by the committee for the coming year:

	Print Name	Signature
Major Professor:	_____	_____
University Representative	_____	_____
Committee Member	_____	_____
Committee Member	_____	_____
Committee Member	_____	_____

Submit signed, completed form to the Graduate Program Specialist or Graduate Program Director.