

SBES Report of Graduate Progress to Degree

Student Name: (print or type)	_____	Date of Review: _____
	(last) (first)	
Student ID:	_____	Current Degree Program (check one):
Advisor's Name & Home Dept.	_____	_____ M.S. _____ Ph.D.
	_____	_____ M.D./Ph.D. _____ D.V.M./Ph.D.

Student Completes the Following:

Your current GPA: _____ GPA Course Credit Hours: _____

Advisor Completes the Following:

1) The overall academic performance of student:

Outstanding (3.75 to 4.0) **Good (3.45 to 3.74)** **Satisfactory (3.0 to 3.44)** **Unsatisfactory (below 3.0)**
 (circle one)

2) Student has an approved Plan of Study by Graduate School for degree program sought: **Yes** **No**
 If no, list anticipated submittal date to SBES Graduate Coordinator's Office: _____

3) Rate the student's research performance:

Outstanding **Good** **Satisfactory** **Unsatisfactory**
 (circle one)

4) Student and faculty have regularly scheduled meetings at least:

Once per week **Once per month** **Once per semester** **Once per year**
 (circle one)

5) Anticipated completion date of degree: _____

Complete the next two for Ph.D. Students Only:

Qualifying Examination was held on schedule (summer following 1st year): **Yes** **No**

Preliminary Examination has been conducted: **Yes** **No**

Comments on overall performance are to be completed by faculty advisor:

A satisfactory evaluation of my academic and research performance (if applies) was held: **Yes** **No**

 Student's Signature Date

Based on my evaluation this student is making accurate progress toward completion of degree: **Yes** **No**

 Faculty Advisor's Signature Date