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|  | Annual Research Progress Evaluation (ARPE)Guidance/Dissertation/Thesis Committee Report |

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| *Student Last Name* | *Student First Name* |

Graduate students are required to meet with their Guidance/Dissertation/Thesis Committee at least once yearly and to prepare and present an ARPE Research Report to the committee at this time. The form below is to be used by the committee to evaluate the student’s performance during the year and at this meeting.

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| **Overall Performance** | *Please evaluate the student in each of the following areas:* | | | | |
|  | ***Skill Acquired*** | ***Being Developed*** | ***Needs Improvement*** | ***Not Applicable*** | ***Unable to Assess*** |
| Background Knowledge |  |  |  |  |  |
| Ability to critically assess journal literature |  |  |  |  |  |
| Ability to independently broaden the relevant knowledge base |  |  |  |  |  |
| Continuing acquisition of experimental methods and skills |  |  |  |  |  |
| Ability to develop an experimental plan |  |  |  |  |  |
| Skill in analysis of data |  |  |  |  |  |
| Skill in applying appropriate statistical analysis |  |  |  |  |  |
| Developing an understanding of the peer review process |  |  |  |  |  |
| Developing an understanding of career options and ability to develop a career plan |  |  |  |  |  |
|  | ***Satisfactory*** | ***Needs Improvement*** |  | ***Not Applicable*** | ***Unable to Assess*** |
| Quality of Research Report |  |  |  |  |  |
| Quality of Presentation |  |  |  |  |  |
| Making adequate Research Progress |  |  |  |  |  |

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| **Comments** | *Please complete each section with detailed information and comments:* |
| Are there any concerns about the research project? | Click here to enter text. |
| Are there any concerns about the student’s performance? | Click here to enter text. |
| Have any concerns and recommendations from the previous ARPE been addressed? | Click here to enter text. |
| Specific recommendations and plans for the next academic year | Click here to enter text. |

Guidance/Dissertation/Thesis Committee

|  |  |  |
| --- | --- | --- |
| Name | Signature | Date |
| Click here to enter text. |  | Click here to enter a date. |
| Click here to enter text. |  | Click here to enter a date. |
| Click here to enter text. |  | Click here to enter a date. |
| Click here to enter text. |  | Click here to enter a date. |

Graduate Student

|  |  |  |
| --- | --- | --- |
| Name | Signature | Date |
| Click here to enter text. |  | Click here to enter a date. |

Faculty Advisor for Continuing Students

|  |  |  |
| --- | --- | --- |
| Name | Signature | Date |
| Click here to enter text. |  | Click here to enter a date. |