

ANNUAL STUDENT EVALUATION

Student Name: _____ ID: _____ Date of last Evaluation: _____

Dept/Program: _____ Degree Sought: _____ Yr in Program: _____

Mentor Name: _____ Expected Date of Degree* _____

Individual Development Plan Discussed with Student: RCR course completed

Upload your EndNote file**

Instructions: [Comment \(opens new menu\)](#) > [Attach file \(paperclip icon with + sign\)](#)

Student's overall progress is: Satisfactory Unsatisfactory

If the student has made unsatisfactory progress the program must attach the correspondence that informs the student that their annual evaluation was unsatisfactory. This communication must specify the reasons for unsatisfactory evaluation, what must be done to receive a satisfactory evaluation, and specify a date for a second review.
The student may submit a response to the unsatisfactory evaluation to the Graduate Dean .

Student Signature: _____ Date: _____

Committee Chair Signature: _____ Date: _____
Signature of the committee chair verifies that the student committee members listed below approve of this report.

Type of student committee that performed Annual Evaluation:

Committee Member Names	Status	Participated in Evaluation?
1. _____		
2. _____		
3. _____		
4. _____		
5. _____		

Chair/Liaison/Director Signature: _____ Date _____

Chair/Liaison/Director Name: _____
Signature of department chair/liaison verifies that the graduate program approves of this Annual Evaluation.

*Students on an F1 Visa are expected to complete the degree sought within five (5) years after matriculation in a graduate program. A request for an extension of the degree completion time along with supporting documentation is required for enrollments beyond (5) years.
**If you have publications