Template: Elements of Annual Reviews of Graduate Students

Student Name: ____________________________  
Program/Degree objective: ____________________________  
Date entered current degree program: ____________________________  
Current cumulative Grade Point Average: ____________________________

PART A: Student Self Report and Self Assessment (To be completed by the student)

1. List all course work completed including required courses and grades. Indicate course work completed during the last year.
2. List other degree requirements completed: (for example, foreign language requirement, English proficiency). Indicate requirements completed during the last year.
3. List all Exams completed. Indicate exams completed during the last year. (Departmental Qualifying or Comprehensive Exams, Graduate College Preliminary Exam and Final Defense, including Committees appointed, exams scheduled, exam results)
4. Other milestones completed: recitals, internships, practica
6. TA/RA service during the last year.
7. Fellowships held during the last year.
8. Professional Activity: Papers, Presentations, Publications during the last year
9. Honors, Awards, competitive scholarships, or other recognitions during the last year
10. Extenuating Circumstances during the past year, if applicable

Signature of Student and Date written review prepared: ____________________________

PART B: Elements of the Department Review (To be completed by the adviser)

1. Areas of Strength (Examples from areas such as courses, milestones completed, research, teaching, professional activity)
2. Areas for Growth and Development for the next year (for example, development of research, writing, public speaking skills, and/or teaching skills, improved course performance)
3. Milestones to complete/Plans for the next year (courses and credit hours to complete, exams to complete, expected progress on thesis/dissertation/project, publications or other professional activity
4. Estimated Graduation Date

Signature of Adviser, Director of Graduate Study and/or Review Committee Chairperson and dates: ____________________________

(Please place a copy in student file; and provide a copy to the student)

Meeting with student conducted  
Date of meeting, who conducted the meeting, any additional notes from the meeting

Attachments:
Current Student CV
The current CV should contain additional information of academic and professional activity and accomplishments previous to the last academic year.
Student comments after the meeting: ____________________________
Adviser comments after the meeting: ____________________________