

# Graduate Student Progress Annual Evaluation Form

## Department of Chemical and Biomedical Engineering

**\*Note: This form must be filled out annually by every student in the Department of Chemical and Biomedical Engineering. This form must be submitted to the student's Major Professor (Advisor) by the final week of the Spring Semester.**

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

Month and year that student joined graduate program: \_\_\_\_\_

Graduate courses taken since matriculation:

#	Course	Semester Taken (e.g., Fall 06)	Grade
1.	ECH 5052		
2.	ECH 5126		
3.	ECH 5261		
4.	ECH 5840		
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			

Courses currently enrolled in: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Name of Major Professor: \_\_\_\_\_

Thesis or Dissertation 1. \_\_\_\_\_, 2. \_\_\_\_\_

Committee members:

3. \_\_\_\_\_, 4. \_\_\_\_\_

*Note: PhD Students must form their Committee in the Spring Semester after successfully passing the PhD Qualifying Exam.*

Program for Instructional Excellence attendance (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Safety Training Course attendance (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Teaching (TA) requirement? (Y/N) \_\_\_\_\_ Date: \_\_\_\_\_

For MS students only:

Number of Thesis credits taken (ECH5971r, 9 hours required) \_\_\_\_\_

Date of MS Committee Meeting during past year: \_\_\_\_\_

Expected Graduation Date: \_\_\_\_\_

For PhD students only:

Date PhD Qualifying Examination passed: \_\_\_\_\_

Date of Prospectus Defense: \_\_\_\_\_

*Note: Prospectus defense must be completed no later than the 5th semester after entering the PhD program; please state reason if you do not meet this requirement.*

Number of Dissertation credits taken (ECH 6980r, 24 hours required): \_\_\_\_\_

Date of PhD Committee Meeting during past year: \_\_\_\_\_

Have you satisfied the residency requirement\*? (Y/N) \_\_\_\_\_

*\* After having finished thirty (30) semester hours of graduate work or being awarded the Masters degree, the student must be continuously enrolled on either the FSU or FAMU Tallahassee campus for a minimum of twenty-four (24) graduate semester hours credit in any period of 12 consecutive months.*

Tentative date of dissertation defense: \_\_\_\_\_

Seminar and Conference Presentations:

Department Seminar Title: \_\_\_\_\_

\_\_\_\_\_

Department Seminar Date of Presentation: \_\_\_\_\_

Conference Presentations - Total Number: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Short Title: \_\_\_\_\_

Short Title: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Place: \_\_\_\_\_

Place: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Publications:

Total Number of Publications: \_\_\_\_\_

Journal Name: \_\_\_\_\_

Journal Name: \_\_\_\_\_

Authors: \_\_\_\_\_

Authors: \_\_\_\_\_

Short Title: \_\_\_\_\_

Short Title: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date Submitted: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

In Review? (Y/N) \_\_\_\_\_

In Review? (Y/N) \_\_\_\_\_

In Print? (Y/N, Date) \_\_\_\_\_

In Print? (Y/N, Date) \_\_\_\_\_

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Major Professor's Comments:

---



---



---



---



---



---



---



---



---



---



---



---



---



---



---

Major Professor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_