| **Student Name:**  | **Date of Meeting:**  |
| --- | --- |
| ***Members of the Committee on Studies (list Chairperson first)*** |
| **Name:** | **Title:** | **Department** | **Signature** |
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| **Were all members present? Yes** [ ]  **No** [ ]  **If not, list those absent:** |
| **Name:** | **Title:** | **Department** |
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|  |  |  |
|  |  |  |
| **Annual Activities and Accomplishment Report Reviewed? Yes** [ ]  **No** [ ]  |
| ***Student’s Academic Progress Since the Last Meeting (If currently enrolled in coursework or reporting on qualifying or comprehensive exams progress)*** |
| **Course Name or Exam Name** | **Evaluation:** |
|  | Deficient[ ]  Acceptable[ ]  Excellent[ ]  Insufficient data to evaluate[ ]  N/A[ ]  |
|  | Deficient[ ]  Acceptable[ ]  Excellent[ ]  Insufficient data to evaluate[ ]  N/A[ ]  |
|  | Deficient[ ]  Acceptable[ ]  Excellent[ ]  Insufficient data to evaluate[ ]  N/A[ ]  |
|  | Deficient[ ]  Acceptable[ ]  Excellent[ ]  Insufficient data to evaluate[ ]  N/A[ ]  |
|  | Deficient[ ]  Acceptable[ ]  Excellent[ ]  Insufficient data to evaluate[ ]  N/A[ ]  |
| Comments:  |

| **Student Name:**  | **Date of Meeting:**  |
| --- | --- |
| ***Student’s Research Progress Since Last Meeting*** |
| Please rate the student’s performance on each of the following areas (add comments below each evaluation): |
| Application of background knowledge base to the relevant research topic | Deficient[ ]  Acceptable[ ]  Excellent[ ]  Insufficient data to evaluate[ ]  N/A[ ]  |
| Comprehension of the relevant literature | Deficient[ ]  Acceptable[ ]  Excellent[ ]  Insufficient data to evaluate[ ]  N/A[ ]  |
| Technical execution/research skills | Deficient[ ]  Acceptable[ ]  Excellent[ ]  Insufficient data to evaluate[ ]  N/A[ ]  |
| Interpreting and analyzing data/troubleshooting | Deficient[ ]  Acceptable[ ]  Excellent[ ]  Insufficient data to evaluate[ ]  N/A[ ]  |
| Using good research practices (i.e., proper safety, etiquette) | Deficient[ ]  Acceptable[ ]  Excellent[ ]  Insufficient data to evaluate[ ]  N/A[ ]  |
| Presentation of research results (oral/written) | Deficient[ ]  Acceptable[ ]  Excellent[ ]  Insufficient data to evaluate[ ]  N/A[ ]  |
| Comments:  |
| ***Student Learning Outcomes*** |
| The following BSGP Student Learning Outcomes (SLOs) are foundational to the BSGP. Select the student’s level for each skill set, with **1 being the lowest level and 5 being the highest**, and describe in each comment section below. |
| Competent, skilled experimentalist | 1[ ]  2[ ]  3 [ ]  4[ ]  5[ ]  |
| Problem solver | 1[ ]  2[ ]  3 [ ]  4[ ]  5[ ]  |
| Critical and independent thinker | 1[ ]  2[ ]  3 [ ]  4[ ]  5[ ]  |
| Expert in the field with both depth and breadth of knowledge | 1[ ]  2[ ]  3 [ ]  4[ ]  5[ ]  |
| Excellent communicator | 1[ ]  2[ ]  3 [ ]  4[ ]  5[ ]  |
| Exemplar of high ethical standards | 1[ ]  2[ ]  3 [ ]  4[ ]  5[ ]  |
| Collaborator and team player | 1[ ]  2[ ]  3 [ ]  4[ ]  5[ ]  |
| Comments:  |
| ***Concentration and Certificate Programs*** |
| If applicable, what is your concentration? |  |
| Is the student making sufficient progress towards completing concentration requirements?  | Yes [ ]  No [ ]   |
| Are you enrolled in the Certificate in University Science Teaching program? | Yes [ ]  No [ ]   |
| Is the student making sufficient progress towards completing the certificate program?  | Yes [ ]  No [ ]   |
| Comments:  |
| ***Goals & Objectives for Next Meeting*** |
|  |
|  |
|  |
|  |
| **Date of Next Meeting:**  |
| ***Additional Comments*** |
|  |
| ***Mentor Signature: Date:***  |
| ***Student Signature: Date:***  |
| I have read this report and I agree [ ]  disagree [ ]  |
| If the student does not agree, please comment to substantiate the disagreement:  |