

**DEPARTMENT OF MOLECULAR BIOLOGY AND MICROBIOLOGY**

**Molecular Biology and Microbiology Program  
Molecular Virology Program, Cell Biology Program**

**SECOND**

Total Letter-Graded Credit Hours: \_\_\_\_\_

**Departmental Seminar (if scheduled):**

**Rate on a scale of 1 (outstanding) to 5 (poor) NOTE: If the student receives scores of 4 or 5 in any areas please describe how these problems will be addressed in the report.**

	Verbal Skills	Audio/Visual	Poise	Understanding, Response to Questions
Chair signature _____ Name (printed):				
Advisor signature _____ Name (printed):				
Member signature _____ Name (printed):				
Member signature _____ Name (printed):				
Member signature _____ Name (printed):				

**Thesis Committee Meeting:**

**Rate on a scale of 1 (outstanding) to 5 (poor).**

	Quality of Report	Progress on Thesis and Publications	Knowledge	Presentation
Chair signature _____ Name (printed):				
Advisor signature _____ Name (printed):				
Member signature _____ Name (printed):				
Member signature _____ Name (printed):				
Member signature _____ Name (printed):				

**General Guidelines**

- ▣ The purpose of this Report is to have a general discussion of the student's research project. The student should submit a 5-page written report to the committee 10 days before the scheduled meeting. The student should also prepare a 10-20 minute presentation for the Committee.
- ▣ Comments may be made on a separate page

## Report

- Attach a copy of the student's annual pre-thesis report



5. Is the student making appropriate progress for a second year student?

YES

NO (please explain):

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6. Responsible Conduct of Research has been discussed.

YES

NO (please explain):

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7. The student's Individual Development Plan has been reviewed.

YES

NO (please explain):

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Advisor

Approved: \_\_\_\_\_ Date: \_\_\_\_\_  
Department Chair/Program Director