Supervisory Committee Meeting Report
As per instructed in the BMS Student Handbook, this form is intended to be completed a minimum of once annually, no later than March of any academic year.

Student Name: ______________________________   Email: ______________________________

Degree Program (select one):  PhD in Biomedical Sciences    PhD in Neuroscience

Date Entered PhD Program: ________________________________

Date of Committee Meeting: ______________________________

Committee Report: Is the student making satisfactory progress towards degree: YES/NO (circle one)

Please provide strengths and areas for improvement in the following areas and, where relevant, any additional areas that can help the student progress.

1. Coursework including timeline for completion:

2. Acquisition of laboratory methods and expertise:

3. Understanding of the literature in the field:

4. Data collection, analysis, and publication:

5. Progress on qualifying exams:

6. Goals, as determined by the committee for the coming year:

________________________________________    _____________________________
Print Name                                      Signature

Major Professor: ________________________________    _____________________________

University Representative ________________________________    _____________________________

Committee Member ________________________________    ____________________________

Committee Member ________________________________    ____________________________

Committee Member ________________________________    ____________________________

Submit signed, completed form to the Graduate Program Specialist or Graduate Program Director.