

Yearly Research Report
Department of Chemistry

Name: _____

Date of Exam: _____

Year in Program: _____

Quality of Paper (circle one):

Satisfactory (S)

Unsatisfactory (U)

Quality of Oral Exam:

Satisfactory (S)

Unsatisfactory (U)

Candidate Recommended as a:

A. Ph.D. Continuation _____

B. M.S. Degree _____

Student will finish research work and submit Master's thesis by the end of
_____ Semester. No further coursework is required.

D. No Graduate Degree _____

Student will leave the program by the end of the current semester.

Grade:

Name of Committee Members

Signature of Committee Members

Please return this form to Ann Dasher, Room A310

Research Report: Faculty Comments Sheet
Department of Chemistry

Name of Presenter: _____

Date of Exam: _____

Committee Member: _____

	N/A	Poor	Average	Good	Excellent
Research progress					
Data obtained					
Results					
Knowledge of field					
Depth of understanding project					
Relation to other work in field					
Level of critical thinking					
Quality of paper					
Grammar and style					
Organization					
Figures					
Quality of oral exam					
Use of language					
Organization					
Quality of slides or overheads					
Response to questions					

Comments:

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Comments:

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