

University at Buffalo
Annual Review Report for Ph.D. Students
STUDENT SECTION

Name: _____ Person Number: _____

Academic Progress

Attach copy of current unofficial transcript

Date of admission to the current program: _____ Expected completion Date: _____

Date or expected date of qualifying exams: _____ Passed? _____

Date or expected date of dissertation proposal defense: _____

Date or expected date of dissertation defense: _____

Current GPA: _____ Number of Incomplete Grades: _____

Number of Resigned Courses: _____

Remaining Coursework:

Professional Performance and Potential

1. Briefly comment on your academic/research progress during the past year. Note areas in which you are experiencing any difficulty.

2. Briefly comment on your progress toward your career goals during the past year.

3. What are your academic goals for the coming year?

Student should attach the following information where applicable

1. Papers published or submitted
2. Abstracts accepted/Presentations at professional conferences
3. Honors/Awards/Grant or Fellowship applications
4. Participation in Teaching
5. Participation in an internship
6. Service to the Department, School, University or a Professional Organization
7. Financial support received (TA, RA, internal fellowship, etc.)

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ACADEMIC ADVISOR/DGS SECTION

Name: _____ Person Number: _____

Date last conferred with student: _____

Academic Performance

1. _____ The student's performance is well above adequate and he/she should be commended.
2. _____ The student's performance is adequate and he/she should be retained.
3. _____ The student's general academic performance is not adequate, it is the considered opinion of the major professor that he/she should not continue in his/her present program. A terminal masters should be considered.
4. _____ The student's current academic performance is below standard and a probationary letter should be issued.

Please comment on the student's overall academic performance including teaching experiences, any strategies for improving performance, specific timeframes for completing expected milestones, etc.:

Student Your signature below indicates that you have discussed the contents of this review report with your major advisor.

Student: _____ Date: _____

Major Professor Your signature below indicates that you have discussed the contents of this review report with the student

Major Professor: _____ Date: _____

Dept Chair or DGS: _____ Date: _____

The original review report is placed in the student's file and copies given to the student and the major advisor.