

APPENDIX H  
**Annual Graduate Student Progress Report**  
Deadline: Submit by April 15th

**Student:** This report serves several important purposes: 1) to provide an opportunity for graduate students and their Research Advisor(s) to reflect on the student's accomplishments over the past year, 2) to strategize and prioritize the student's goals for the forthcoming year, and 3) to ensure that students are making adequate progress in their scholarly development and research progress. Complete all requested information and review the information with your Research Advisor. Submit a printed, signed copy of this form to the Biology Graduate Program Administrator by the above deadline.

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**PART 1:**

Student: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Degree Program (PhD/MS): \_\_\_\_\_ Entered Program in (Semester and Year): \_\_\_\_\_

Research Advisor: \_\_\_\_\_

Research Committee Members: \_\_\_\_\_

Date of Last Annual Research Committee Meeting: \_\_\_\_\_

Financial Support for Current Academic Year:

TA  RA  Fellowship  Other: \_\_\_\_\_

Anticipated Financial Support for Next Academic Year:

TA  RA  Fellowship  Other: \_\_\_\_\_

If none, state reason (e.g., graduating): \_\_\_\_\_

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**Part 2:**

**RESEARCH PROGRESS AND GOALS:**

**Suggested format:** Please write a few paragraphs (or create a bulleted list) highlighting your accomplishments and activities during the past year, and summarizing your goals for the forthcoming year. You should include sufficient detail to permit assessment by your Research Advisor and the Graduate Education Committee. (To answer one or both questions below, you may attach one or two additional sheets, if necessary, but no more than 2 pages total. Any additional pages should also include a line for your Research Advisor's signature.)

- 1) Describe progress made toward the completion of your degree (and other scientific accomplishments or activities) since the beginning of last summer:

Student Name: \_\_\_\_\_

2) Describe your research goals for the forthcoming year:

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

**To Research Advisors:**

Your signature below indicates that you have read and approved this completed document. Completed and signed forms are a requirement for continued financial support of a student (e.g., Teaching or Research Assistantships).

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