

ESE Graduate Student Committee Meeting

Each Committee Member, including Chairs and Co-Chairs, should complete the following form and indicate the students overall progress, including strengths, weaknesses, and recommendations.

Student Name: _____**Degree Program:** _____**Committee Meeting Date:** _____**Program Start Date (Mo/Yr):** _____**Coursework Evaluation**☐

Meets Expectations

☐

Does Not Meet Expectations

Comments:

Research Evaluation☐

Meets Expectations

☐

Does Not Meet Expectations

Comments, including progress made towards goals set in the prior committee meeting:

SUMMARY

Overall Recommended Actions/Goals and Deadlines/Timeline:

Chair/Co-Chair/Committee Member Name_____
Signature_____
DateElectronically submit form to ESE: ese@purdue.edu