

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

Part 2:
Annual Meeting with Advisory Committee

This section must be completed by students who began Fall 2020 or after and have completed the Qualifying exam. This section is optional for students enrolled before Fall 2020.

Meeting Date: _____

Major Professor Name (required) Signature Date

Committee Member Name (required) Signature Date

Committee Member Name (required) Signature Date

Additional Member Name (optional) Signature Date

Any comments from the advisory committee can be entered here:

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Part 3:
Professional Performance and Potential

(May attach as a separate page as needed)

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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FACULTY ADVISOR SECTION

Date last conferred with student: _____

Academic Performance – Please check which is most applicable:

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 faculty advisor 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 research performance, 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: _____

Faculty Advisor: Your signature below indicates that you have discussed the contents of this review report with the student.

Faculty Advisor: _____ Date: _____

(COMPLETED AFTER SUBMISSION TO DEPARTMENT)

Graduate Director's Signature

Date