CMP RECORD OF ANNUAL THESIS COMMITTEE MEETING

REQUIREMENT: Thesis committee meetings must begin without the student present for the mentor to review the student’s progress with committee members. At the end of the meeting, the mentor must leave the room so that the student can talk alone with committee members.

Name of student: _____________________________   Date of meeting: _________________________

Class: (please circle appropriate year)  2nd year  3rd year  4th year  5th year  6th year

Name of advisor: _________________________________

Number of previous thesis committee meetings:  __________

☐ The advisor and the student met and discussed their completed “Annual Progress Evaluation and Mentoring Session” forms on ____________. The advisor and student should retain copies.

The above named student has conferred with his/her committee that found his/her progress to be ______ satisfactory ______ unsatisfactory.

If unsatisfactory, briefly state the recommendations of the committee: _____________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

The above named student is in the "final phase" of his/her research, and will be ready to write their dissertation and complete the Ph.D. degree when the following requirements have been met:

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

Advisor's signature ___________________________ Date ____________________

Names and Signatures of Committee Members Present:

1) ___________________________ ___________________________
   Name                               Signature

2) ___________________________ ___________________________
   Name                               Signature

3) ___________________________ ___________________________
   Name                               Signature

Please return to Madeline McLaughlin (202 Physiology) after each meeting.

Revised: 11/8/2016