

Ph.D. Guidance Committee Meeting Report Form I

Department of Physics & Astronomy

Student Name: _____

Date: _____

Research Advisor: _____

	Qualifier	Candidacy	Mechanics	E&M	Quantum	Stat.Mech.
Exams passed:	<input type="checkbox"/>	<input type="checkbox"/>	Grades: <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Guidance comm. form completed:	<input type="checkbox"/> Yes	<input type="checkbox"/> No				

Research plan presented: Yes No, tentative date: _____

If yes: Satisfactory Not satisfactory, reschedule for: _____

Reason:

Recommendation for continuing support:

Goals for the next year:

Goals for Graduation:

Career plan and other activities:

Approved by the Guidance Committee:

Name:

Signature:

Student (Signature):

The student should give copies of the signed form to the advisor and the Physics Department secretary. NSCL students should also give a copy to the Asc. Dir. for Education