



Student Name: _____ Date: _____

Email: _____ Telephone: _____

Quarter and Year student entered Graduate School: _____

Date of advancement to candidacy: _____

Expected Quarter and Year of thesis defense: _____

Date of previous committee meeting: _____

Comments from Thesis Advisor (Required):

Please attach typed comments after the meeting or email comments to Pam McDonald and Graduate Advisor, Jennifer Martiny.

Comments from committee members (Optional):

Comments from the student (Optional):

Please attach typed comments after the meeting or email comments to Pam McDonald and Graduate Advisor, Jennifer Martiny.

Committee Member and student signatures for student progress (Required)

Name:	Signature	Satisfactory progress?
_____ Student	_____	<input type="checkbox"/>
_____ Thesis Advisor	_____	<input type="checkbox"/>
_____ Committee Member	_____	<input type="checkbox"/>
_____ Committee Member	_____	<input type="checkbox"/>
_____ Committee Member	_____	<input type="checkbox"/>
_____ Committee Member	_____	<input type="checkbox"/>

Please return this form with all signatures to Pam McDonald, 321A Steinhaus Hall.

Date received in Office _____