PhD Students: IFRP Evaluation Form

Student’s name: _______________________________

The above-named student has given an In Field Research Proposal on __________. Our evaluation is:

☐ High PASS (A)
☐ PASS (A)
☐ Low PASS (B)
☐ FAIL (C+ or lower, committee should determine grade below)
☐ FAIL with opportunity to repeat (C+ or lower, see above)

Date: __________

_______________________________   _________________________________
Thesis Advisor Name, Printed                  Signature

_______________________________   _________________________________
Co-advisor Name, Printed                  Signature

_______________________________
Co-advisor Name, Printed                  Signature

Comments (may reflect views of the committee as a whole or those of individual members):

Recommendation for advancement to candidacy:

_______________________________   _________________________________   _________________________________
Thesis Advisor, Signature                  Co-advisor, Signature                  Co-advisor, Signature

Comments regarding student’s Individual Development Plan:

Please note: The University/SAS form for advancement to candidacy is separate from this form and requires approval of the Chem 611 (OFRP) Instructor and the Graduate Program Director.