

## **PhD Students: IFRP Evaluation Form**

Student's name:		_			
The above-named student h	as given an In Field Re	search Propos	sal on Ou	r evaluation is:	
<ul> <li>☐ High PASS (A)</li> <li>☐ PASS (A)</li> <li>☐ Low PASS (B)</li> <li>☐ FAIL (C+ or lower, comm</li> <li>☐ FAIL with opportunity to</li> </ul>		ne grade belov		·	
Thesis Advisor Na	me, Printed	Signature			
Co-advisor Name, Printed		Signature			
Co-advisor Name, Printed		Signature			
Comments (may reflect views o		whole or thos	e of individual membe	ers):	
Thesis Advisor, Signature	Co-advisor, Signature	Co-advisor, Signature		Co-advisor, Signature	
Comments regarding student's	Individual Developme	ent Plan:			

Please note: The University/SAS form for advancement to candidacy is separate from this form. The department will submit that form on the student's behalf after receiving clearance from the CARL instructor.