MASTERS DEGREE PROGRESSION EVALUATION

A. Information provided by student	
Student Name:	Major Professor:
Area of Concentration:	
Date of Evaluation Meeting:	Year in Program:
This form is to be filled out twice per year and prior	r to May 15th and December 15th of <i>each year</i> .
Progress toward fulfilling degree requirements (in	ndicate expected completion dates)
	Date completed
Advisory committee (form)	
Preliminary program of study (form)	
Annual meeting with advisory committee	
Final program of study (form)	
Application for graduation (online form)	
Thesis proposal approved by major professor	
Thesis proposal defense scheduled	
Thesis proposal defense (form)	
Major professor approves Thesis (form)	
Notify graduate coordinator of Thesis defense schedule	
Submit information to Graduate School for commencen	nent program (online form)
Thesis defense (form)	
Final exam (form)	
Final Thesis approved by major professor (form)	
	nt information for evaluation; NANot applicable. If you ain. Please fill in dates when specific requirements have been
Progress in research project (scholarly Public	cations, Presentations, etc.)
Communication (interactions with advisory c	committee members, etc.)
Additional comments:	
Student:	
Major Professor:	