Wayne State University Pharmacology Ph.D. Program:
Report on Doctoral Dissertation Committee Meeting

This form is to be completed by the student’s Doctoral Committee immediately following the meeting. Upon completion, the document should be forwarded to the Department’s Graduate Officer. A copy will also be provided to the student.

Student’s name: ________________ Adviser: ________________

Date, Time, and Place of meeting: ________________________________

1. Members of dissertation committee present: _______________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

If any committee members were absent, how did the student gain their input (e.g. by meeting with them beforehand or through provision of written comments on material)? ______________
   ___________________________________________________________________

2. On what date did the student provide the committee members with progress material? ____
Specific comments on the quality of the written progress material provided: ______________
   ___________________________________________________________________
   ___________________________________________________________________

3. How long did the meeting last? ________________________________

Specific comments on the quality of the oral presentation and the discussion (e.g. knowledge of the field, organization and integration of material, data interpretation and analysis, communication skills.) ______________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

Are there any specific areas in which significant improvements either have occurred or still need to occur? ______________
   ___________________________________________________________________
   ___________________________________________________________________
4. When should the next meeting be scheduled (maximum time: 6 months)? ______________

5. What are the specific goals for the next research period? (Use back of page as needed.)

________________________________________________________________________

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6. Are there any other recommendations for the student’s progress (e.g. increased involvement in research design or literature awareness, more faculty consultation, initiation of search for post-doctoral position)? ______________

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________________________________________________________________________

________________________________________________________________________

[Use back of sheet(s) as necessary to continue any item or for any other information.]

Adviser signature: ___________________________ Date: ___________________________

Committee Member Signatures:

_________________________ ___________________________

_________________________ ___________________________

_________________________ ___________________________

Student signature: ___________________________