



Graduate Student Annual Evaluation

Department of Chemical & Biomedical Engineering

***Note: This form must be filled out annually by every student in the Department of Chemical & Biomedical Engineering. This form must be submitted to the student's Major Professor (Advisor) by the final week of the Spring Semester.**

Student Name: _____ Date: _____

Semester that student joined graduate program (Fall, Spring or Summer & Year): _____

All graduate courses taken since matriculation (include any transfer credits but not including dissertation or thesis hours):

Course	Semester Taken (e.g., Fall 14)	Grade
ECH 5052		
ECH 5126		
ECH 5261		
ECH 5840		

Current Courses: 1. _____ 2. _____ 3. _____ 4. _____

Name of Major Professor: _____

Thesis or Dissertation Member 1. _____ Member 2. _____

Committee members:

Member 3. _____ University Rep _____

Note: PhD Students must form their Committee in the Spring Semester after successfully passing the PhD Qualifying Exam.

Program for Instructional Excellence attendance: PIE Date: _____
(sexual harassment training as part of PIE Workshop is mandatory)

Safety Training Course attendance: Safety Date: _____

Teaching (Lab TA) requirement: Lab TA Semester: _____

Grader, Teaching Assistant, Instructor or Lab TA Tracking (Starting from Spring 2014):

Semester	Course	Course Professor

For MS students only:

Number of thesis credits taken (ECH5971r, 9 hours required): _____

Date of MS Committee Meeting during past year: _____

Expected Graduation Date: _____

Thesis Title:

For PhD students only:

Date PhD Qualifying Examination passed: _____

1st Attempt:
2nd Attempt:

Date of Prospectus Defense: _____

Note: Prospectus must be completed no later than the 5th semester after entering PhD program

If the prospectus defense has been delayed, please provide a reason:

Number of Dissertation credits taken (ECH 6980r, 24 hours required): _____

Date of PhD Committee Meeting during past year: _____

** Please note that annual PhD committee meetings are mandatory*

Have you satisfied the residency requirement?:

** After having finished 30 hours of graduate work or being awarded a MS degree, the student must be enrolled continuously at either the FSU or FAMU Tallahassee campus for a minimum of 24 graduate semester hours in any period of 12 consecutive months.*

Tentative date of dissertation defense: _____

Dissertation title:

Seminar and Conference Presentations (please list all authors in order):

DEPARTMENTAL RESEARCH DAY PRESENTATIONS:

Department Seminar Title 1: _____

Department Seminar Date of Presentation 1: _____ Poster or Oral 1: _____

Department Seminar Title 2: _____

Department Seminar Date of Presentation 2: _____ Poster or Oral 2: _____

Department Seminar Title 3: _____

Department Seminar Date of Presentation 3: _____ Poster or Oral 3: _____

Department Seminar Title 4: _____

Department Seminar Date of Presentation 4: _____ Poster or Oral 4: _____

Department Seminar Title 5: _____

Department Seminar Date of Presentation 5: _____ Poster or Oral 5: _____

CONFERENCE PRESENTATIONS:

Number of Oral Presentations as MAIN speaker: _____

Number of Poster Presentations as MAIN presenter: _____

Number of all others as contributor: _____

Total Number: _____

Conference (Date and Location): _____

Presentation Title: _____

Oral or Poster: _____

Were you the LEAD presenter? _____

Conference (Date and Location): _____

Presentation Title: _____

Oral or Poster: _____

Were you the LEAD presenter?: _____

Conference (Date and Location): _____

Presentation Title: _____

Oral or Poster: _____

Were you the LEAD presenter?: _____

Conference (Date and Location): _____

Presentation Title: _____

Oral or Poster: _____

Were you the LEAD presenter?: _____

CONFERENCE PRESENTATIONS cont.:

Conference (Date and Location): _____

Presentation Title: _____

Oral or Poster: _____

Were you the LEAD presenter?: _____

Conference (Date and Location): _____

Presentation Title: _____

Oral or Poster: _____

Were you the LEAD presenter?: _____

Conference (Date and Location): _____

Presentation Title: _____

Oral or Poster: _____

Were you the LEAD presenter?: _____

Conference (Date and Location): _____

Presentation Title: _____

Oral or Poster: _____

Were you the LEAD presenter?: _____

Conference (Date and Location): _____

Presentation Title: _____

Oral or Poster: _____

Were you the LEAD presenter?: _____

PUBLICATIONS:

Total Number of Publications: _____

Journal 1: _____

Authors 1: _____

Title 1: _____

Date Submitted 1: _____

In Review 1? (Y/N): _____ In Print 1? (Y/N) _____

Full Reference 1 (Date, Volume, Issue, Pages, and DOI if available): _____

Journal 2: _____

Authors 2: _____

Title 2: _____

Date Submitted 2: _____

In Review 2? (Y/N): _____ In Print 2? (Y/N) _____

Full Reference 2 (Date, Volume, Issue, Pages, and DOI if available): _____

Journal 3: _____

Authors 3: _____

Title 3: _____

Date Submitted 3: _____

In Review 3? (Y/N): _____ In Print 3? (Y/N) _____

Full Reference 3 (Date, Volume, Issue, Pages, and DOI if available): _____

PUBLICATIONS cont.

Journal 4: _____

Authors 4: _____

Title 4: _____

Date Submitted 4: _____

In Review 4? (Y/N): _____ In Print 4? (Y/N) _____

Full Reference 4 (Date, Volume, Issue, Pages, and DOI if available): _____

Journal 5: _____

Authors 5: _____

Title 5: _____

Date Submitted 5: _____

In Review 5? (Y/N): _____ In Print 5? (Y/N) _____

Full Reference 5 (Date, Volume, Issue, Pages, and DOI if available): _____

Journal 6: _____

Authors 6: _____

Title 6: _____

Date Submitted 6: _____

In Review 6? (Y/N): _____ In Print 6? (Y/N) _____

Full Reference 6 (Date, Volume, Issue, Pages, and DOI if available): _____

Student's Self-assessment: *Please include accomplishments during the last year, frank assessment of weaknesses and where progress is needed, and goals for the next year.*

Student Signature: _____ Student Date: _____

Major Professor's Comments:

Major Professor's Signature: _____ Prof Date: _____