

Department of Electrical and Computer Engineering

| GPP6- Doctoral Student Annual Evaluation Form This form is now used for all ECE PhD students whether or not you have taken the prelim exam |
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| Academic year (e.g. 2012-2013) |
| Date of Evaluation: Home University: FAMU FSU |
| Student ID: Email Address: |
| Student Name: |
| Major Professor: |
| Years in Program: 1 2 3 4 5 6 7 8 or more: list # of years here: |
| Have you taken the Prelim Exam? Yes No |
| If you have taken/passed the prelim then all committee signatures are required below. If not, then only your advisor's signature is required below. |
| This section must be completed by the advisor in consultation with the student. |

Student's degree progress & committee feedback:

Milestones achieved:

Plan for the coming year:

If the student has taken/passed the prelim then all committee signatures are required. If not, then only the advisor's signature is required.

| | | Evaluation of Academic Progress |
|---|---------------------|------------------------------------|
| Committee Chair | Signature | SU |
| Committee Member | Signature | SU |
| Committee Member | Signature | SU |
| I have read and understand my evaluation. | | |
| Printed Name of Student | Student Signature | Date |
| Do not write below this line – Fall 2021 – V1 | | |
| Upload Date: Date copy sen | t to major advisor: | # of Unsat: |



FLORIDA AGRICULTURAL AND MECHANICAL UNIVERSITY

SCHOOL OF GRADUATE STUDIES AND RESEARCH

GRADUATE STUDENT PROGRESS REPORT

PART II

TO BE COMPLETED BY THE DOCTORAL STUDENT

This form must be completed at the end of every academic year and is a requirement for continued funding. Also, a review of your progress and performance must be conducted on an annual basis. Each section of this form must be completed before funding will be awarded.

Academic Year _____ Semester(s) _____

| NAME OF DOCTORAL STUDENT | [| SIGNATURE OF | | | |
|--|--------------|-------------------|--|--|--|
| | | DOCTORAL STUDENT | | | |
| iRATTLER ID# | | CONTACT # | | | |
| FAMU EMAIL (REQUIRED) | | ALTERNATIVE EMAIL | | | |
| SCHOLARSHIP, PRESENTATIONS, PROFESSIONAL DEVELOPMENT, ACCOMPLISHMENTS, AND GOALS | | | | | |
| List external fellowships received and the funding agency. | | | | | |
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| List presentations (include dates) on and off campus. | | | | | |
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| List publications (published and pending) and include author(s) date, title, journal, pages, etc). | | | | | |
| | | | | | |
| Honors/Awards/Service | | | | | |
| HONORS: | nonors/Awaru | 5/501100 | | | |
| AWARDS: | | | | | |
| SERVICE: | | | | | |
| List career, internships, and/or professional development activities. | | | | | |
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| List your accomplishments for this evaluation period. | | | | | |
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| List goals you would like to achieve/accomplish prior to your next evaluation. | | | | | |
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