PHARMACOLOGY THESIS COMMITTEE FORM

Student’s name: _____________________________________________________     Date of meeting: _______________
Thesis Advisor: _____________________________________________________________     Year of study: ___________
Committee members in attendance: ____________________________________________________________________

Please evaluate each of the areas below by circling the appropriate descriptor and provide comments where appropriate.

This form should be signed by advisor, committee members and student and brought by the student to the DGS

1. Progress since last thesis committee meeting (or qualifying exam if no prior meeting):
   Cause for concern to committee    Acceptable    Outstanding
   If cause for concern, please explain:

2. Knowledge of the relevant scientific literature:
   Cause for concern to committee    Acceptable    Outstanding
   If cause for concern, please explain:

3. Thinking critically about the project, seeing the “big picture”:
   Cause for concern to committee    Acceptable    Outstanding
   If cause for concern, please explain:

4. Demonstrating initiative and independence in experimental design and project directions:
   Cause for concern to committee    Acceptable    Outstanding
   If cause for concern, please explain:

5. Motivation and work ethic:
   Cause for concern to committee    Acceptable    Outstanding
   If cause for concern, please explain:

6. Technical competence at the bench, trouble-shooting ability:
   Cause for concern to committee    Acceptable    Outstanding
   If cause for concern, please explain:

7. Quality of written and oral presentations:
   Cause for concern to committee    Acceptable    Outstanding
   If cause for concern, please explain:

Note: If this is the first thesis committee since the qualifying exam, an evaluation of at least acceptable in all areas 1-7 above is required for the student to be admitted to candidacy.
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8. Is the student on track to graduating in 5 years?
   Yes  Probably  Maybe  No  Too soon to say

9. Does the student have a publishable story or at least the beginnings of one?
   Yes  Probably  Maybe  No  Too soon to say
   the student should present an outline of the figures of the paper/s

10. Should the student consider switching to a new project?
    Yes  No  Too soon to say
    Comments: if in doubt please describe additional experiments to assess the viability of the project

11. When should the student have another committee meeting?
    3 months  6 months  9 months  12 months

12. Did the student complete the IDP (Individual Development Plan) form at http://www.yale.edu/hronline/idp/docs/IDP-Form.pdf and discussed with mentor? (Note: Must be completed and sent to department registrar prior to committee meeting)
    Yes  No
    (Note: Students are required to have at least 1 meeting and complete IDP per academic year)

13. Does the committee agree with the student’s future plans as stated in the student’s Progress report summary?
    Yes  No
    If no, please explain
    If certain minimal goals must be achieved in order for the student to remain in good academic standing, please specify them and any deadline for meeting them:

13. Does the committee agree with the student’s proposed thesis outline and plan for graduation (assuming it was presented)? Yes, means that it is the last thesis committee meeting and the student is being given permission to schedule a PRE-DEFENSE seminar date.
    Yes  No
    If no, please explain:

    Any other comments:

Committee chair’s name: _______________________________________________________

Committee chair’s signature:  ___________________________________________________

Thesis committee member name and signature: ____________________________________

____________________________________
____________________________________

Student signature: ___________________________________________________________

Student should deliver completed signed form to Pharmacology Registrar.

Updated: 06/20/16