## GMB Graduate Program Dissertation Advisory Committee Meeting Summary and Progress Report

The purpose of this form is to summarize and document the outcome of dissertation committee meetings and is to be completed at the conclusion of the meeting. Dissertation committee meetings must occur at least twice every academic year starting in the third year. Students in their sixth year and beyond must have dissertation committee meetings at least every four months (fall, spring, and summer semesters). The student and the advisor must sign the report, and it must be distributed by the student to the Director of Graduate Studies (original), and the Program Administrator (copy)

**Note:** At the beginning of the meeting, the student will be excused for 5 minutes to give the mentor an opportunity to privately express concerns/heap praise or alert the committee to emerging issues or timelines. Immediately following this, the mentor will be excused for 5 minutes to give the student an opportunity to privately raise issues relating to the mentoring relationship or research environment that they deem significant. Topics discussed in these 5-minute sessions remain strictly private and are not discussed in the meeting or added to the sections below. Significant issues should be communicated to the DGS by the Committee Head or Member in a timely manner.

Students: SUDMIT THIS DEDORT IMMEDIATELY FOLLOWING THE MEETING

	Students. Sobiati This REPORT immediately to Clowing the Meeting
Stı	udent (print): Year in Program:
Ad	visor (print): Meeting Date:
	To be completed by Student prior to the meeting
1. 2. 3.	Are you currently engaged in teaching beyond the TA requirement?  Yes No
4.	Briefly list remaining requirements (e.g., aims and experiments) for your dissertation and propose an approximate timetable for completing them. Indicate which you aim to complete by date of next meeting.
5.	List publications with authorship (submitted/accepted) since last meeting. Also list patents, invention reports, etc.
6.	IDP (Individual Development Plan) Slides presented: Yes No
	To be completed by Head or Member of the dissertation committee

1. Comments on student's progress on dissertation since last meeting:

3. Comments on student's timetable for completing dissertation:  4. Is the student making adequate research progress? If not, briefly explain why.    Committee Members: print and sign your name Rate student's progress to degree since last meeting on a 1-9 scale (9 = best)   Exceptional progress   Commendable progress   Improvement needed (9 8 7) (6 5 4) (3 2 1)    Advisor Name   Signature   Score				
4. Is the student making adequate research progress? If not, briefly explain why.    Committee Members: print and sign your name Rate student's progress to degree since last meeting on a 1-9 scale (9 = best)   Exceptional progress   Commendable progress   Improvement needed (9 8 7) (6 5 4) (321)   Advisor Name   Signature   Score				
Committee Members: print and sign your name         Rate student's progress to degree since last meeting on a 1-9 scale (9 = best)         Exceptional progress       Commendable progress       Improvement needed         ( 9 8 7 )       ( 6 5 4 )       ( 3 2 1 )         Advisor Name       Signature       Score         Co-Advisor or Member Name       Signature       Score         Member Name (Head)       Signature       Score         Member Name       Signature       Score         Member Name       Signature       Score         Member Name       Signature       Score         Approximate Date of Next Committee Meeting:       Date:         Student Signature:       Date:	3. Comments on student's timetab	le for completing dissertation:		
Committee Members: print and sign your name         Rate student's progress to degree since last meeting on a 1-9 scale (9 = best)         Exceptional progress       Commendable progress       Improvement needed         ( 9 8 7 )       ( 6 5 4 )       ( 3 2 1 )         Advisor Name       Signature       Score         Co-Advisor or Member Name       Signature       Score         Member Name (Head)       Signature       Score         Member Name       Signature       Score         Member Name       Signature       Score         Member Name       Signature       Score         Approximate Date of Next Committee Meeting:       Date:         Student Signature:       Date:				
Committee Members: print and sign your name         Rate student's progress to degree since last meeting on a 1-9 scale (9 = best)         Exceptional progress       Commendable progress       Improvement needed         ( 9 8 7 )       ( 6 5 4 )       ( 3 2 1 )         Advisor Name       Signature       Score         Co-Advisor or Member Name       Signature       Score         Member Name (Head)       Signature       Score         Member Name       Signature       Score         Member Name       Signature       Score         Member Name       Signature       Score         Approximate Date of Next Committee Meeting:       Date:         Student Signature:       Date:				
Rate student's progress to degree since last meeting on a 1-9 scale (9 = best)  Exceptional progress	4. Is the student making adequate	research progress? If not, briefly	explain why.	
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Advisor Name  Signature  Co-Advisor or Member Name  Signature  Score  Member Name (Head)  Signature  Score  Member Name  Signature  Date:		Committee Members: print and	sign your name	
Co-Advisor or Member Name  Signature  Score  Member Name (Head)  Signature  Signature  Score  Member Name  Signature  Signature  Score  Member Name  Signature  Score  Approximate Date of Next Committee Meeting:  Student Signature:  Date:		progress to degree since last m	eeting on a 1-9 scale (9 = best)	
Co-Advisor or Member Name  Signature  Score  Member Name (Head)  Signature  Signature  Score  Member Name  Signature  Signature  Score  Member Name  Signature  Score  Approximate Date of Next Committee Meeting:  Student Signature:  Date:	Exceptional progress	progress to degree since last m Commendable progres	ss Improvement need	
Member Name (Head)  Signature  Score  Member Name  Signature  Score  Member Name  Signature  Score  Member Name  Signature  Score  Approximate Date of Next Committee Meeting:  Student Signature:  Date:	Exceptional progress ( 9 8 7 )	progress to degree since last m  Commendable progres  ( 6 5 4 )	ss Improvement need	
Member Name  Signature  Score  Score  Member Name  Signature  Signature  Score  Approximate Date of Next Committee Meeting:  Student Signature:  Date:	Exceptional progress ( 9 8 7 )  Advisor Name	Commendable progress to degree since last m Commendable progress ( 6 5 4 ) Signature	leeting on a 1-9 scale (9 = best) Improvement need (321)	
Member Name  Signature  Score  Member Name  Signature  Score  Approximate Date of Next Committee Meeting:  Student Signature:  Date:	Exceptional progress ( 9 8 7 )  Advisor Name	Commendable progress to degree since last m Commendable progress ( 6 5 4 ) Signature	leeting on a 1-9 scale (9 = best) Improvement need (321)	
Member Name  Signature  Score  Approximate Date of Next Committee Meeting:  Student Signature:  Date:	Exceptional progress ( 9 8 7 )  Advisor Name  Co-Advisor or Member Name	Commendable progress ( 6 5 4 )  Signature  Signature	Interesting on a 1-9 scale (9 = best) Improvement need ( 3 2 1 )  Score	
Approximate Date of Next Committee Meeting:  Student Signature: Date:	Exceptional progress ( 9 8 7 )  Advisor Name  Co-Advisor or Member Name  Member Name (Head)	Commendable progres ( 6 5 4 )  Signature  Signature  Signature	Interesting on a 1-9 scale (9 = best) Improvement need ( 3 2 1 )  Score  Score	
Student Signature: Date:	Exceptional progress ( 9 8 7 )  Advisor Name  Co-Advisor or Member Name  Member Name (Head)  Member Name	Signature  Signature  Signature  Signature	ss Improvement need ( 3 2 1 )  Score  Score  Score	
	Exceptional progress ( 9 8 7 )  Advisor Name  Co-Advisor or Member Name  Member Name (Head)  Member Name  Member Name	Signature  Signature  Signature  Signature  Signature	ss Improvement need ( 3 2 1 )  Score  Score  Score  Score	
DGS Signature: Date:	Exceptional progress ( 9 8 7 )  Advisor Name  Co-Advisor or Member Name  Member Name (Head)  Member Name  Member Name  Member Name	Signature  Signature  Signature  Signature  Signature  Signature  Signature	ss Improvement need ( 3 2 1 )  Score  Score  Score  Score  Score	
	Exceptional progress ( 9 8 7 )  Advisor Name  Co-Advisor or Member Name  Member Name (Head)  Member Name  Member Name  Approximate Date of Next Committee	Signature Signature Signature Signature Signature Signature Signature	ss Improvement need (321)  Score  Score  Score  Score  Score	ed

2. Comments on student's objectives for the next 6-month period:

Deliver the original signed form to: Director of Graduate Studies (DGS)

Email a scanned copy to: Program Administrator (Roberta Lynn) <a href="mailto:ralynn@emory.edu">ralynn@emory.edu</a>