

University at Buffalo
Annual Review Report for Ph.D. Students
ACADEMIC ADVISOR/DGS SECTION

Name: _____ Person Number: _____

Date last conferred with student: _____

Academic Performance

1. _____ The student's performance is well above adequate and he/she should be commended.
2. _____ The student's performance is adequate and he/she should be retained.
3. _____ The student's general academic performance is not adequate, it is the considered opinion of the major professor that he/she should not continue in his/her present program. A terminal masters should be considered.
4. _____ The student's current academic performance is below standard and a probationary letter should be issued.

Please comment on the student's overall academic performance including teaching experiences, any strategies for improving performance, specific timeframes for completing expected milestones, etc.:

Student Your signature below indicates that you have discussed the contents of this review report with your major advisor.

Student: _____ Date: _____

Major Professor Your signature below indicates that you have discussed the contents of this review report with the student

Major Professor: _____ Date: _____

Dept Chair or DGS: _____ Date: _____

The original review report is placed in the student's file and copies given to the student and the major advisor.