PhD Milestones - Comprehensive Exam

<table>
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<tr>
<th>After passing the Preliminary Exam - meet with a number of faculty members about possible topics for your research project</th>
<th>Student</th>
<th>Faculty</th>
<th>Program</th>
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<tr>
<td>Schedule a tentative exam date at least 4 months prior to prevent scheduling conflicts</td>
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<tr>
<th>Comprehensive Exam: (Completed by the end of the student’s third year)</th>
<th>Prior Term</th>
<th>Current Term</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Comprehensive Exam:</strong></td>
<td>Finalize transfer and/or validation of credits</td>
<td>Must be registered for at least 1 credit hour. If your examination occurs between terms, you will be required to register for the subsequent term</td>
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<tr>
<td><strong>8 weeks prior</strong></td>
<td>E-mail your research proposal to Chair &amp; Mentor. Submit the Approval of Thesis Proposal form (signed by Chair &amp; Mentor) to Galit (Form will be signed AFTER the receipt of proposal)</td>
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<td>Check graduate faculty appointment status for all committee members</td>
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<td>Receive forms and further instructions from Galit</td>
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<td><strong>4 weeks prior</strong></td>
<td>Submit paperwork to Galit. She will hand them in to the graduate school</td>
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<td>E-mail your finalized research proposal to committee members and Galit</td>
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<tr>
<td><strong>Forms:</strong> Application for Admission to Candidacy - original signature</td>
<td>Request for Scheduling Examination</td>
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<td>Galit circulates an announcement on campus and posts it on-line</td>
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<tr>
<th>Exam Day</th>
<th>Good Luck! If you pass with conditions - you must satisfy them within 4 months Chair mails all original forms back to Galit (B141)</th>
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<td>Start data collection! Meet with your committee at least once a year - Chair should e-mail the Thesis Committee Report Form to Galit after each mtg</td>
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<td>Register for a minimum of 5 thesis credits (CLSC 8990) each Fall and Spring semester until the defense is passed</td>
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<td>Minimum total number of thesis hours is 30</td>
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The CTSA grant must be cited in the finalized version of the student’s Thesis and any publications resulting from it. The following language should be used when citing the grant:

“This project/publication is Supported by NIH/NCATS Colorado CTSA Grant Number UL1 TR002535. Contents are the authors’ sole responsibility and do not necessarily represent official NIH views.”

In addition, publications should be registered with PubMed Central.
The following members of the Thesis Committee have approved the dissertation proposal submitted by ________________________________

Doctoral Candidate

Chairperson

__________________________

Print name

__________________________

Signature  Date

Research Mentor

__________________________

Print name

__________________________

Signature  Date

This form is to be submitted to the Clinical Science Graduate Program’s Administrative Office:
Galit.mankin@cuanschutz.edu
Application for Admission to Candidacy

This application is to be completed by the student, recommended by the appropriate designated faculty, and submitted to the Graduate School by the published deadline.

Degree for which you are applying for candidacy:
○ Master's ○ EdD ○ PhD

Name as on University Records (Last, First Middle):

Mailing Address:

Telephone Number:

Email Address:

Student Number:

Degree/Program:

Examination Committee (Master's - List your final examination committee) (Doctoral - List your comprehensive exam committee)

Chair:

Member:

Member:

Member:

Member:

Student Signature:

To be Completed by the Student's Graduate Program:

The admission of __________________________ to candidacy for the __________________________ degree is recommended by the __________________________ program upon completion of the minimum requirements of __________________________ semester hours. The courses listed on the following pages have been approved for use toward the degree.

Advisor Signature

Advisor's Name:

Department Head Signature

Department Head Name

For Graduate School Use Only

Grad School Approval:
List courses below that will apply toward your degree in chronological order (beginning with the oldest and ending with the most current). Course numbers must match those on your transcript and instructors name must be include. YOU MAY NOT SIMPLY ATTACH A TRANSCRIPT. Transfer courses and thesis/dissertation/project/report hours should be listed in the appropriate sections of this form.

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<tr>
<th>Instructor (First Initial, Last Name)</th>
<th>Semester</th>
<th>Year</th>
<th>Title of Courses Taken at University of Colorado</th>
<th>Department and Course Number</th>
<th>Semester Hours</th>
<th>Grade</th>
<th>Notes</th>
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For Graduate School Use Only
Subtotal:

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<th>Instructor (First Initial, Last Name)</th>
<th>Semester</th>
<th>Year</th>
<th>Thesis/Dissertation Project/Report</th>
<th>Department and Course Number</th>
<th>Semester Hours</th>
<th>Grade</th>
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For Graduate School
Use Only
Subtotal:

## Transfer Credits
Courses taken as non-degree at other CU campuses are not considered transfer, since they appear on your transcript.

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<th>Institution at Which Courses were Taken</th>
<th>Semester</th>
<th>Year</th>
<th>Title of Courses to be Transferred</th>
<th>Department and Course Number</th>
<th>Semester Hours</th>
<th>Grade</th>
<th>Notes</th>
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For Graduate School
Use Only
Subtotal:

Total:
Request for Graduate Examination/Thesis Defense

This form is due AT LEAST two weeks prior to the date of the examination. See the instruction sheet for information on filling out this form.

Student Name: ___________________________ Student Numbers: ___________________________

Degree/Program: ___________________________

Type of Examination: (Check One)
- Master’s Thesis Defense (Plan I)
- Doctoral-Comprehensive Examination
- Master’s Non-Thesis (Plan II)
- Doctoral-Thesis Defense
- Choose one of the following:
  - Project
  - Report
  - Comp Exam

Date of Exam: ___________________________ Time of Exam: ___________________________

Room Number: ___________________________

Examination Committee (type names, no signatures):

<table>
<thead>
<tr>
<th>Faculty Name</th>
<th>Program Affiliation</th>
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<tbody>
<tr>
<td>Chair:</td>
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ALL students must obtain the signature of their graduate program director, approving the above information.

Grad. Prog. Director: ___________________________ Date: ___________________________
INSTRUCTIONS FOR DOCTORAL
STUDENTS PLANNING TO TAKE
THE COMPREHENSIVE EXAMINATION

All forms must be typed.

Signature Instructions:
If you are using Adobe Acrobat reader, you will need to fill out the form, print it, and obtain hard signatures. You cannot save any changes you make to the document, so be sure to print the form once you have completed it.

If you are using Adobe Acrobat professional, you can obtain all digital signatures. To sign the form digitally, you will click on the signature box in the form. A pop up box will appear that asks what you would like to do. You can choose an existing digital ID (choose this option if you already have created a signature and follow the process you would for other forms). If you have not digitally signed a PDF before, choose “A new digital ID I want to create now” and click “next”. On the next screen, choose “New PKCS #12 digital ID file” and click “next” (If you are a Mac user, this screen will not appear. Skip this step and move onto the next one). Enter your identifying information and click “next”. On the next screen, choose a file in which to store your signature for future use and create a password. Then click “Finish”. You will then be prompted to sign the document by entering your password. Enter your password and click “sign”. You will be prompted to save the form and once you have done so your digital signature will appear.

Once you have completed the form and signed it electronically, you can email onto others to sign digitally using the mail (it looks like a small envelope) at the top of the screen.

1. **Application for Admission to Candidacy**
   Before you attempt to complete this form, it is suggested that you print out your transcript and have it available. On page 2, make sure your courses are listed in chronological order (the oldest courses are listed first) and that you have the correct information listed for each course. All students must have a minimum of 30 semester hours listed (these are minimums; your program may require additional credits). The purpose of this form is to allow your program to approve the courses you are using for your degree (not necessarily all the courses you have taken) and to give them the opportunity to ensure you have taken all your required courses. You may not simply attach a transcript. All courses must have letter (A or B and + or -) grades. Courses in which you received Honors or Pass are not acceptable toward a doctoral degree.
Once you have completed the form please reference instruction at the top of this page regarding the signature section of the form. It is your responsibility to make sure that the form arrives at the Graduate School Office by the established deadline. When the Application has been approved by the Graduate School, you will be sent notification. You cannot take the comprehensive exam until this application is approved. After passing the comprehensive examination you are considered to be admitted to candidacy for the PhD/EdD degree.

2. **Request for Scheduling Examination**

Students should fill out this form, obtain the required signature, and return it to the Graduate School at least two weeks prior to the date you plan to take the examination.

**STUDENT NAME** - Your name as it appears on University records. No nicknames.

**STUDENT NUMBER** - Check with Admissions and Records if you are unsure of this.

**DEGREE/PROGRAM** - e.g. – PhD, Nursing; PhD, Health and Behavioral Sciences

**TYPE OF EXAMINATION** - Self-explanatory.

**DATE OF EXAM** - the month/day/year that you will take exam. Check with program advisor/program director if unsure.

**TIME** - the time the exam will begin.

**ROOM NUMBER** - list the building and room number (NOT the room's name).

**THESIS ADVISOR/MENTOR** - list the faculty member’s name who will be directing your thesis research (if known)

**EXAMINATION COMMITTEE** - All members must have current Graduate Faculty appointments. The chair of the committee must hold a regular appointment in the Graduate School. The student’s dissertation advisor may not chair the examination committee. List each member by their full name (don't use nicknames or initials) and their graduate program affiliation per the drop down box.

**CU Anschutz students**: Your committee must consist of a minimum of five Graduate Faculty members. See the [Graduate Faculty list](#) online to check faculty appointment term and program affiliations. At least one of the members must be outside your program’s core training faculty. The majority of the members, including the chair, must be from your program’s core training faculty. If the faculty member has multiple program affiliations listed on the website, list your program if that is one of their affiliations or their list “sponsor” program if they are not affiliated with your program.

**CU Denver students**: Your committee must consist of a minimum of three Graduate Faculty members. Your committee chair must be a member of the degree-granting program. Please contact Jessica Halliday at 303-315-2183 or Jessica.halliday@ucdenver.edu for any questions regarding the status of an appointment for a committee member.
REQUIRED APPROVAL SIGNATURES - This would be your Graduate Program Director. See information at the top of this page regarding signature instructions.

3. **Transfer of Credit**
To transfer credit taken at the University of Colorado as a non-degree student, simply add the courses to the Application for Admission to Candidacy. Identifying them as non-degree student credits and obtaining the signature of your advisor and program director will approve the courses for transfer and application to your degree.

Courses taken outside of the University of Colorado system must be transferred using the transfer of credit form. You will need to have the form signed by your advisor and program director and submitted to the Graduate School, along with a transcript, the semester prior to the term of your comprehensive examination. The course must be graduate level, at least a "B-" grade or better (Pass/Fail grades are not allowed), taken within the seven year time limit, and taken at an accredited institution.

4. **Registration for the Examination**
All students are required to be registered during the semester in which the comprehensive examination is taken. If you are already registered for a course or thesis hours, you do not have to register for any additional coursework. If you are not registered, you may register for 1 to 10 thesis hours. After passing the examination, you must begin registering for a minimum of 5 thesis hours each Fall and Spring semester.

5. **Doctoral Thesis Hours (8990)**
After passing the comprehensive examination, you must register for doctoral thesis hours (8990). The minimum number of thesis hours necessary for the doctoral degree is 30 semester hours. If you choose to defend your dissertation between semesters you must register for the subsequent semester.

**CU Anschutz students:** You are required to continuously register for a minimum of five (5) semester hours each Fall and Spring semester until you successfully defend your thesis. You must be registered for a minimum of five thesis hours during the semester of your thesis defense regardless of the number of thesis hours that have accumulated to date.

**CU Denver students:** You are required to continuously register for a minimum of five (5) semester hours each Fall and Spring semester until you have reached 30 credit hours. Then you can register for 1 thesis credit each semester until you successfully defend your thesis. You must be registered for at least one hour of doctoral thesis during the semester of your thesis defense regardless of the number of thesis hours that have accumulated to date.

6. **Examination Results**
The following results are possible:

- **PASS** - this means that you have passed the examination and may continue in the program as a candidate for the doctoral degree.

- **PASS WITH CONDITIONS** - this means that you have passed, pending the completion of conditions imposed by your committee. You should start to register for thesis hours as if
you had passed without conditions. The committee will notify you of the conditions which must be satisfied within a timeframe not to exceed four months. Failure to satisfy the conditions will result in a failure of the examination.

**FAIL** - this means that you have failed the examination. The Graduate School Rules stipulate that a student failing the comprehensive examination is subject to immediate dismissal from the Graduate School. At the program’s discretion, a student who fails the exam may retake it once. The retake of the exam must be done within twelve months of the original exam.

*Updated-08/08/2013*
Clinical Science PhD Program: Comprehensive Examination Checklist
(Expectations of the Chair)

**2-4 days prior to the Comprehensive Examination**, ensure that you have received the necessary paperwork from Galit Mankin:

- Graduate School Information/Instruction sheet
- Graduate School Confirmation Sheet
- Graduate School Comprehensive Examination Report form
- CLSC Comprehensive Examination Attendance form
- Student’s completed coursework and grades record
- CLSC Comprehensive Examination Report form
- Copy of student’s thesis proposal – should be provided by the student directly to the committee members

If you have not received these documents, please contact Galit Mankin at galit.mankin@cuanschutz.edu or 720-848-6249

**Day of the Comprehensive Examination**

1. Have attendees sign-in using the CLSC Comprehensive Exam Attendance form
2. Introduce the student and the title of his/her thesis proposal
3. Explain the structure of the Comprehensive Examination
   - Open forum session will include PhD student’s presentation (approx. 40-45 mins) followed by questioning (approx. 20-30 mins)
   - Closed session follows the open forum (only committee members and student)
4. Following the presentation and questioning, thank and dismiss attendees and begin the closed session (ONLY committee members and student)
5. Ask student to step outside room (10mins), while the examination committee discusses the following points:
   i. Ensure all members have read the proposal
   ii. Determine order and format of questioning
   iii. Review student’s coursework and grades
   iv. Determine if there are major concerns of the candidate
6. Call student back into the examination room to begin closed session questioning
7. Once questioning is completed, ask student to step outside the room (10-15 mins) while committee deliberates.
8. Chair the committee member executive session
   a. Determine examination grade: pass, pass with conditions, or fail
      - If pass with conditions, the conditions need to be clearly documented and a date by which the conditions must be met identified on paper (conditions must be satisfy within 4 months). This paper should be provided to the CLSC Program Administrator, Galit Mankin.
   b. Have committee members sign Graduate School Comprehensive Examination Report form
   c. Complete the CLSC Comp Exam Form with committee member input
9. Call the candidate back into the room to join the committee and share the results of the examination. If there are conditions, explain the steps that the student must complete and the timeframe for completion.

10. Remind the student that the CTSA grant must be cited in the finalized version of the student’s Thesis. The following language should be used when citing the grant:

   “This project/publication is supported by NIH/NCATS Colorado CTSA Grant Number UL1 TR002535. Contents are the authors’ sole responsibility and do not necessarily represent official NIH views.”

   In addition, publications should be registered with PubMed Central.

11. Scan and e-mail the completed Graduate School and CLSC forms to: Galit.mankin@cuanschutz.edu

   AT NO TIME IS THE STUDENT TO HAVE POSSESSION OF ANY OF THE GRADUATE SCHOOL FORMS
CLSC Comprehensive Examination Attendance Form

SPEAKER: __________________________________________

DATE: ____ / _____ / _____

ATTENDEES (please PRINT name clearly):

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The student’s performance during the Comprehensive Examination and review of the written thesis proposal and coursework grades suggest that the student is progressing as follows towards CLSC core competencies:

1. Understands legal, ethical and regulatory issues related to clinical research and principles for Responsible Conduct of Research.
   - Exceeds expectations
   - Meets expectations
   - Below expectations

2. Critically appraise existing literature and sources of information.
   - Exceeds expectations
   - Meets expectations
   - Below expectations

3. Accurately select, use and interpret commonly used statistics.
   - Exceeds expectations
   - Meets expectations
   - Below expectations

4. Apply and use appropriate study designs and methods to address research questions/hypotheses.
   - Exceeds expectations
   - Meets expectations
   - Below expectations

5. Identify and measure clinically relevant and meaningful outcomes.
   - Exceeds expectations
   - Meets expectations
   - Below expectations

6. Design and conduct clinically and patient oriented research studies.
   - Exceeds expectations
   - Meets expectations
   - Below expectations

7. Demonstrate effective communication and leadership skills.
   - Exceeds expectations
   - Meets expectations
   - Below expectations

8. Participate in interdisciplinary collaboration.
   - Exceeds expectations
   - Meets expectations
   - Below expectations

Comments:

This form is to be submitted to the Clinical Science Graduate Program’s Administrative Office: Galit.mankin@cuanschutz.edu
CLINICAL SCIENCE GRADUATE PROGRAM
Thesis Committee Report

Student: ____________________________  Date of Meeting: ____________________________

Research Mentor: ____________________  Dissertation Chair: _______________________

Committee Members in Attendance:
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________

1. Has the student made satisfactory progress?  YES  NO
   If yes, attach student’s progress summary.
   If no, explain the reasons.

2. Please list publications submitted, In Press, published and/or grants submitted, or awarded since the last committee meeting.

3. Is there evidence that the student is sufficiently committed to the research?  YES  NO

4. Does the student have sufficient knowledge of the current literature?
   ☐ Exceeds expectations  ☐ Meets expectations  ☐ Below expectations

5. Is the student able to critically appraise evidence and various sources of information?
   ☐ Exceeds expectations  ☐ Meets expectations  ☐ Below expectations

6. Does the student have sufficient knowledge to apply legal, ethical, and regulatory issues related to clinical research and principles for the Responsible Conduct of Research?
   ☐ Exceeds expectations  ☐ Meets expectations  ☐ Below expectations

7. Did the student display the ability to select, use and interpret commonly used statistics and forms of analyses?
   ☐ Exceeds expectations  ☐ Meets expectations  ☐ Below expectations
8. Did the student demonstrate the ability to use appropriate research design to address the research questions or hypotheses?
   □ Exceeds expectations   □ Meets expectations   □ Below expectations

9. Does the student have ability to identify and measure clinically relevant and meaningful outcomes?
   □ Exceeds expectations   □ Meets expectations   □ Below expectations

10. Through the final research project, is the student participating in interdisciplinary research?
    YES      NO

11. Has the student communicated effectively (written and oral) in committee meetings?
    □ Exceeds expectations   □ Meets expectations   □ Below expectations

12. What are the specific concerns of the committee related to the project/student?

13. The committee recommends the following activities, experiments and/or goals to be accomplished by the next meeting.

14. Has the student been made aware of concerns, expectations or recommendations of the committee?
    YES      NO
    If yes, explain.

15. Are there any disagreements within the committee or between committee members and the student?
    YES      NO

16. Date by which next meeting should be held?____________________________________

This form is to be submitted to the Clinical Science Graduate Program’s Administrative Office: Galit.mankin@cuanschutz.edu