

Neuroscience Program Form 3 Report of Supervisory Committee

Submit to Neuroscience Program office after each committee meeting

Date of Committee meeting: _____

Committee members present: _____

Didactic Work Completed: (please ✓)

First-year Coursework Completed :

Neuroscience Program Rotations: NEUSC 6900 (3x), Neurophysiology Laboratory: NEUSC 6245,
 Molecular Biology Laboratory: NEUSC 6250, Cellular and Molecular Neuroscience: NEUSC 6040,
 Principles of Systems Neuroscience: NEUSC 6050, Developmental Neurobiology: NEUSC 7750,
 Critical Thinking / Proposal Preparation: MBIOL 6200 / 6300 (Capstone Exam)

Exception: _____

Advanced Didactic Training _____
(3 graduate level elective _____
courses) _____

Lecture TA IDP Speaking presentations (3x)	Research Ethics Statistics/ Quantitative Sciences	Advanced Student Review (ASR)

Summary of Progress: Note critical factors, such as execution of experimental work, analytical skills, independence, quality of presentations, notable strengths and weakness. Specify plans to complete coursework and any other factors impacting program of study. Use additional pages if necessary.

Signature denotes student is making reasonable progress: Signature

(Advisor)	
(Student)	

DATE: _____ Submission of F-31 grant

**NEUROSCIENCE PROGRAM
STUDENT TRACKING AND EVALUATION FORM**

Student Name: _____

Period being evaluated: _____

Year in Program: 1st _____ 2nd _____ 3rd _____ 4th _____ 5th _____ \geq 6th _____

ARE YOU OFFICIALLY CLASSIFIED AS A UTAH RESIDENT BY THE U OF U?: yes _____ no _____

Supported by: Program _____ NP Training Grant _____ Mentor _____ NRSA _____

Other(specify) _____

In an attempt to better advise students, the Program would like each student to complete the following questions that ask you to do some self-evaluation of your professional goals.

1. At the present time, what is(are) your career goal(s)?

2. What strengths do you see yourself having at the present time that provide a good fit with your career plans?

3. What areas do you think you need to develop so that your skills better match your career goals?

4. What are your plans to develop those skills/areas?

5. In what ways can the Neuroscience Program/Mentor help you develop these areas and move toward your career goal(s) in the next 6 months?

Courses taken this past year:

Department	Title/Course number	Hours	Grade
1.			
2.			
3.			
4.			
5.			

Courses to be taken next year:

Department	Title/Course number	Hours
1.		
2.		
3.		
4.		
5.		

Comments on course content, suitability, etc. of courses taken this year: _____

Research this year was: rotation _____ Dissertation/pre-qualifying _____ Dissertation _____

Project title: _____

Project start and end dates: _____ to _____

Seminar Presentation this year? Yes _____ No _____ **Date:** _____

Title: _____

Seminar evaluation received: Yes _____ No _____

Evaluation discussed with mentor: Yes _____ No _____

If you have been advanced to candidacy: Date late dissertation committee meeting held _____

Committee members present: _____

Committee members absent: _____

Manuscripts and Abstracts published this year (give authors (surname and initials), title, journal name, volume, and inclusive page numbers). If submitted, indicate so.

Student Teaching: Yes _____ No _____

Course: _____ **Lecture Title:** _____

Comments on the experience: _____

Was faculty help adequate before delivery? Yes _____ No _____

Was faculty help adequate after delivery? Yes _____ No _____

