

**Bioinformatics and Computational Biology  
Research and Curriculum Progress Form**

**Student name:**

**Meeting date:**

**Degree program**      MS              PhD

**Year in Program**      1              2              3              4              5

**Is sufficient progress being made in the study plan?**

Excellent                               Sufficient                               Not sufficient

**Is sufficient progress being made in the research plan?**

Excellent                               Sufficient                               Not sufficient

**Are plans being made for a lab rotation, or has a rotation been done?**

Plans made                               No plans so far                               Rotation done

**Are plans being made to fulfill the teaching requirement, or is teaching done?**

Plans made                               No plans so far                               Teaching done

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**MEETING SUMMARY (use additional pages as needed):**

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**Student's Faculty Advisor:**

Signature: \_\_\_\_\_

Printed name: \_\_\_\_\_

Date: \_\_\_\_\_

**Student's Advisory Committee Member:**

Signature: \_\_\_\_\_  
Printed name: \_\_\_\_\_  
Date: \_\_\_\_\_

**Student's Advisory Committee Member:**

Signature: \_\_\_\_\_  
Printed name: \_\_\_\_\_  
Date: \_\_\_\_\_

**Student's Advisory Committee Member:**

Signature: \_\_\_\_\_  
Printed name: \_\_\_\_\_  
Date: \_\_\_\_\_

**Student's Advisory Committee Member:**

Signature: \_\_\_\_\_  
Printed name: \_\_\_\_\_  
Date: \_\_\_\_\_

**BCB Director**

Signature: \_\_\_\_\_  
Printed name: \_\_\_\_\_  
Date: \_\_\_\_\_