

Department of Theological Studies

DOCTORAL STUDENT ANNUAL REVIEW FORM

*Students: Please complete electronically, sign, and submit hard copy to the Director of Graduate Studies by **March 15**.*

STUDENT INFORMATION

Date of Evaluation: _____

Name: _____

Email: _____

Phone: _____

LANGUAGE ACQUISITION

List any language competency exams you have taken, the dates of those exams, and their results. Provide an expected timeline for the fulfillment of all language requirements (indicating in which languages you intend to demonstrate competency, how you intend to acquire competency, and when you plan to take the competency exams).

COMPREHENSIVE EXAMINATIONS

List the comprehensive exams you have taken, the dates of those exams, and their results. Provide an expected timeline for the completion of all exam requirements.

DISSERTATION RESEARCH

Describe your current progress with the research requirements of the program (i.e., thesis, dissertation). Provide expected timelines, with dates, for completion of the major components of your thesis or dissertation (i.e., prospectus defense, written drafts of individual chapters, final written version, committee approval, oral defense).

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List below all articles or manuscripts submitted for publication this academic year, indicating the journal to which they were submitted and the results of editorial reviews.

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List below all internal or external grant submissions (or your participation in submissions) this academic year, indicating the funding source to which they were submitted and the results of the reviews, if known.

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Describe any specialized training in teaching. Have you completed or do you plan on completing the Certificate Program in Teaching from the Reinert Center for Transformative Teaching and Learning?

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List below all internships that you have had this academic year, indicating the place, time commitment, and activities of the program.

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List all professional organizations of which you are a student member, including any offices held.

Describe any professional service and/or leadership positions associated with the university, graduate education, department or program. Indicate your title and dates of service.

List any awards, honors and achievements you have received this academic year.

Are there any other factors that you would like to have included in your evaluation?

EVALUATION: TO BE COMPLETED BY FACULTY

Based on the faculty's discussion, the quality of your work was rated in each of the following areas.

	Not Meeting Expectations	Meeting Expectations
Academic Quality of Coursework		
Research Quality of Thesis, Prospectus or Dissertation		
Research Quantity (timely completion of project)		
Comprehensive Examinations		
Language Acquisition		
Assistantship Quality and Quantity		
Professional Development		
Collegiality		

Commentary (Include specific, written goals for the upcoming year if a student is "not meeting expectations" in any area.)

 Student's signature

 Date

 Director of Graduate Studies' signature

 Date