# WEC GRADUATE STUDENT SEMESTER EvaluatioN

***Email to Ivette Hernandez (******ivette.hernandez@ufl.edu******) when completed, with signatures.***

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| **Student Name:** |  | **Current Term/Year:****Degree Sought:****Qualifying Exam (Term/Yr):** **Year Degree Expected:**  |
| **Major Advisor:** |  |
| **TA Supervisor:** |  |

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| **Achievements, accomplishments, and responsibilities** (Completed by Student) |
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| **OVERALL Evaluation** *(Completed by Advisor)* ***M****eritorious,* ***S****atisfactory,* ***U****nsatisfactory* |
| * Assigned Responsibilities:
* Professional Progress:
* Other:
 |
| **TA Evaluation** *(Completed by TA Supervisor) NA /* ***M****eritorious,* ***S****atisfactory,* ***U****nsatisfactory* |
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| **self evaluation by student** *(Professional Development on Track, Adjustments Needed?)* |
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| **Primary Goals / objectives For next evaluation period** *(Completed by Advisor and Student)* |
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| --- | --- |
| STUDENT Signature | Supervisor Signature |
|  |  |
| Date | Date |
| SUPERVISING INSTRUCTOR SIGNATURE |  Semester / Year that Research Proposal was Approved |
|  |  |
| Date | Term = \_\_\_\_\_\_ Year = \_\_\_\_\_\_\_\_\_ (check if NA \_\_\_\_\_) |