



THE UNIVERSITY OF ARIZONA
COLLEGE OF AGRICULTURE & LIFE SCIENCES

Nutritional Sciences

GRADUATE STUDENT PROGRESS REPORT DUE BY THE END OF EACH SEMESTER

Instructions: Please answer all of the following questions. If not applicable, indicate NA. When completed, submit the form electronically to your advisor and to Nancy Driscoll at nancya@arizona.edu

Note: This document is information to track your progression in the Nutritional Sciences Graduate Program - it is not an official record.

Student Name: _____ **Today's Date:** _____

Year Entered the Program: _____ **Degree Sought:** **M.S.** **Ph.D.**

Date of Review: _____ **Date of last Review (if applicable)** _____

Major Advisor: _____

Graduate Committee Members:

DOCUMENTATION

| | |
|--|--|
| Describe your progress for the current semester. | |
| Plan of Study | |
| Committee Appointment Form | |
| Preliminary Exam | |

Thesis or Dissertation Committee meetings:

Date of meeting: _____

Comment on how committee meetings contribute to research progress:

Progress in conducting dissertation/thesis activities:

| Activity | Completed/Date |
|-------------------------------------|----------------|
| 1. IRB Approval for Proposal | |
| 2. Animal Approval (if appropriate) | |
| 3. Data Collection | |
| 4. Data Analysis | |
| 5. Results and Discussion written | |

RESEARCH PROGRESS

| Describe your achievements | |
|---|--|
| Development of new research techniques | |
| Important research discoveries | |
| Manuscripts, grant applications | |
| Meeting presentations, attendance | |
| Intellectual or technical collaborations | |
| Improvements in intrapersonal and networking skills | |
| Seminars given | |

INDIVIDUAL CAREER DEVELOPMENT PLAN

| Create or update your IDP on http://myidp.sciencecareers.org/ | Date completed | Date(s) updated | | |
|--|----------------|-----------------|--|--|
| | | | | |

DESCRIBE YOUR CAREER GOALS (Include long-term and short-term goals)

CAREER DEVELOPMENT

| | |
|---|--|
| When do you expect to graduate? If you are close to graduation, what do you need to accomplish to meet all of the requirements? | |
| Have you begun to think about your next position? What options are you thinking of pursuing at this stage in your graduate career, knowing that this may change over the time? | |
| What action items and activities have been added or planned that are in line with stated career goal? | |
| Have you sought out feedback from others (outside of NSGP and mentor) on your career plan? Please describe | |
| Have you identified individuals who can provide you with letters of support/recommendation for fellowships, postdoc positions, job applications? List these individuals and your reasons for choosing them. | |

What are your goals for the coming semester?

This is a true and accurate statement of my activities and accomplishments.

Signature / printed name

Date

I give the Department of Nutritional Sciences permission to release the information regarding any presentations, publications, funded research, and honors/awards submitted on this report to the Department of Nutritional Sciences, and my name and image may be used for publicity purposes associated with the presentations, publications, funded research, and honors/awards.

Yes

No

Forward this completed form, along with your updated CV to your major advisor and NSGP coordinator.