

Appendix B

MA Student Annual Review

Advisor Brief Report

To be completed by September 30 of the second year and each subsequent year in the Fall enrollment

Completed copies go to graduate coordinator, student, and advisor

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Faculty Advisor: \_\_\_\_\_

Current GPA: \_\_\_\_\_ Banner ID: \_\_\_\_\_

Graduation Option: (circle one) Thesis Project Internship Courses Only

Anticipated Graduation Date: \_\_\_\_\_

Deadline to Apply for Graduation: \_\_\_\_\_

List any Courses taken with a grade of B- or lower:

\_\_\_\_\_  
\_\_\_\_\_

List any courses with a grade of incomplete (IN) or in progress (IP):

\_\_\_\_\_  
\_\_\_\_\_

Describe what requirements (courses/or GPA) remain for graduation:

\_\_\_\_\_  
\_\_\_\_\_

Describe any notable research/teaching/service accomplishments (publications, presentations, awards, etc.)

\_\_\_\_\_  
\_\_\_\_\_

Student Signature/Date: \_\_\_\_\_

Advisor Signature/Date: \_\_\_\_\_