

## Jenkins Thesis Advisory Committee Meeting Form

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

Student Email: \_\_\_\_\_ Advisor: \_\_\_\_\_ Year: \_\_\_\_\_

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*This form is to be completed by the Committee Chair shortly after the conclusion of the TAC meeting.*

*This record should reflect the consensus of the feedback from following committee members:*

### Committee Members

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Committee Member #1 (CHAIR)

Committee Member #2 (Thesis Advisor)

Committee Member #3

Optional Additional Member and Affiliation

### Committee Feedback

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	Strong	Satisfactory	Needs Work
Familiarity with literature in the area of study			
Critical thinking in discussion of hypotheses			
Rigor of experimental design			
Appropriateness of data management			
Rigor of data analysis			
Clarity and organization of the presentation			
Feasibility of student's proposed research activities and timeline for the next year			

Summary of student's progress:

Committee recommendations:

**Student's Overall Progress**

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The student has made exceptional progress.

The student has made satisfactory progress.

The student has made progress but would benefit from additional oversight.

There are concerns regarding the trajectory or thesis project.\*

\*If this is selected, the student and advisor must meet with the program director to discuss an action plan.

**Student's Timeline**

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The committee estimates that this student will complete their degree in:

6 Months or Fewer

1 Year

2 Years

More than 2 Years

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**Committee Chair's Signature**

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*By signing this document, I confirm that the feedback presented herein reflects the input of all members of the Thesis Committee.*

Committee Chair: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Once you have signed above, please email this form to:  
Brett Weinstein, [bweinstein@jhu.edu](mailto:bweinstein@jhu.edu)**

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**Thesis Advisor's Signature**

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*By signing this document, I confirm that I am in agreement that the feedback presented herein fairly represents the consensus views of the full Thesis Committee. I also confirm that I will meet with the PhD Student to discuss this form and feedback.*

Thesis Advisor: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PhD Student's Signature**

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*By signing this document, I confirm that I have reviewed the feedback presented herein. I also confirm that my Thesis Advisor has provided me the opportunity meet and discuss any questions or concerns that I may have about this form and feedback.*

PhD Student: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_