DEPARTMENT OF BIOCHEMISTRY AND MOLECULAR BIOLOGY
UNIVERSITY SCHOLARS PROGRAM

Progress Report

Name______________________________________________________________________ Semester: Fa Sp Su 20___
PSU Email:________________________________________________________________________________________________________________
Thesis Advisor_____________________________________________Honors Advisor (BMB/MICRB)_________________________________

1. Recognizing that not all research efforts yield positive results, describe and evaluate the work/progress that you have made toward your research goal this semester.

(Use other side if necessary)

To be completed by thesis advisor:

1. Do you concur with the student's evaluation of his/her research efforts for this semester as indicated above?  
   Yes  No (explain)

2. In your judgement, the effort expended by the student in all aspects of the research project this semester was
   less than acceptable (explain)
   acceptable
   more than acceptable (explain)

3. In your judgement, the student has demonstrated
   less than acceptable (explain)
   reasonable
   beyond expected (explain)

ability to think critically in the conduct of research in your laboratory this semester.

4. Have points 1-3 been discussed with the student? Yes  No__________________

   Signature of thesis advisor________________________________________________________

**AFTER OBTAINING THESIS ADVISOR'S SIGNATURE, PLEASE RETURN COMPLETED FORM TO 107 ALTHOUSE FOR COPYING, DISTRIBUTION, AND FILING.**