# Graduate Student Research and Career Progress Annual Review

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| Student: | Advisor: | |
| Signatures: |  | |
| Pharmacy Subprogram: | | Review Date: |
| Comprehensive Exam Completed:  Yes  No | Anticipated Graduation Date: | |
| **Part 1A. Research / Scholarly Activity in the Past Year (Progress Review)** | | |
| a. Brief overview of your research project & major accomplishments in the past year (250-300 words): | | |
| b. Publications: | | |

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| c. Patents: |
| d. Honors/Awards (include fellowships with entire funding periods, grants written/applied for/received, professional society presentation awards or travel awards, etc.): |
| e. National or other professional meetings attended (include meeting title, oral or poster presentation): |
| f. Seminar Presentations (title, department): |
| g. Internships completed or ongoing: |
| h. New areas of research or technical expertise acquired in past year and brief indication of how this expertise was obtained (e.g., in lab, class, industry experience, self-taught, etc.): |
| **Part 1A. Advisor comments:** |

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| **Part 1B. Teaching Activity (Progress Review)** |
| a. Oversight of undergraduate, summer, or other students (name, academic level, project title): |
| b. Teaching Assistant or other teaching activities such as course lectures (department, course name) or lab sections(section title, supervised/unsupervised): |
| **Part 1B. Advisor comments:** |
| **Part 1C. Other Professional Activities (Progress Review)** |
| a. Committee or other service activity (indicate if you held an office): |
| b. Other professional and/or leadership activities not identified above: |
| c. Clinical activity: |
| d. Other activities (community, etc.) with professional relevance: |
| **Part 1C. Advisor comments:** |
| **Part 2A. Research and Other Training Plans (for the Upcoming Year)** |
| a. Research project goals (brief paragraph): |
| b. Anticipated publications (indicate projected titles): |
| c. Anticipated meeting or workshop attendance: |
| d. Fellowship or other funding applications planned (indicate name of award): |
| e. Other professional training (course work, teaching activity, internships, entrepreneurial): |
| **Part 2A. Advisor comments:** |
| **Part 2B. Career Goals** |
| a. Current career goal(s): |
| 1) |
| 2) |
| b. What further research activity or other training is needed before it is appropriate to start a job search? |
| c. When do you anticipate beginning a job search? |
| d. Please indicate if there are other issues that affect your job search (e.g., dual career; an international trainee seeking a position in his/her home country): |
| **Part 2A. Advisor comments:** |
| **Estimated date for next meeting:** |