Neuroscience Training Program Advisory Committee Report

Name of Student:	Major Professor:				
Date of Committee Meeting:	Date of Report:				
Names of Committee Members Present:					
Names of Committee Members Absent:					
Brief Description of Student's Progress Sin A. Activities Outside the Laboratory (e.g. a participation/performance in subgroups etc	attendance at Monday afternoo				
B. Research Activities (e.g. participation in lab meetings, discussion/involvement with research, independence, initiative, research progress, etc.)					
Summary Evaluation: Progress is: A. Satisfactory	B. Marginal C	. Unsatisfactory			
If B or C, Please Comment:					
Recommendations:					
Signature of Major Professor:					
Signature of Student:		_			

Please return to Program Administrator, 7225 Medical Sciences Center

SAMPLE

Neuroscience Training Program Student Progress

13-Aug-02

First Name: Joe

Last Name: Student

Year **Entered:**

9/1/99

Major Professor: Professor

Committee Members:

Benca, Kelley, Landry,

Robertson, Roseboom

Last Committee Meeting: 9/18/01

Fall 01

Dissertator: 2/01

Certification Form I:

Yes

Certification Form II: Yes

Certification Form III:

No

Research Presentation: F/01

Teaching Requirement: Su 00 & 02 PEOPLE

Midlevel Requirement: 2/00

Molecular/Cellular _{2/00}, Neurosci 625

Systems/Behavior

Course:

2/00, Neurosci 630

Course:

Prerequisites: ok

Certification Form I should be completed at the first Advisory Committee meeting. It is a record of courses that the student and the Advisory Committee agree should be completed by the student. This form needs to be filed in the Program Office before a Warrant for the Preliminary Exam can be issued.

Certification Form II should be completed following the Preliminary Exam. It is a record of the Preliminary Exam.

Certification Form III should be completed before the Dissertation is defended. Forms II and III need to filed in the Program Office before the Final Oral Committee Approval Form will be signed by the chair.

The Seminar Presentation of the Thesis Proposal should be completed following the successful completion of the Preliminary Examination. Please contact the Program Office for available dates.

The Program requires that each student teach for one semester. The teaching requirement can be completed following the Preliminary Examination and must be completed by the Dissertation Defense.

The Mid-Level Course Requirement can be met by taking one course from each of two categories. All course requiements must be completed before the Preliminary Examination.

Prerequisites are any courses required for admission to the Program that were not completed before admission. These courses must be taken or be in progress the semester the Preliminary Examination is completed.

SAMPLE

NEUROSCIENCE TRAINING PROGRAMCertification for the Ph.D. Degree and Training Record

PART I

<u>NAME</u>						
CERTIFICATION						
Date admitted to the Program:						
Major Professor:						
Advisory committee (five or more faculty members, including the major professor, collectively representing at least three distinct areas of specialization within neuroscience):						
Name Department Are	<u>rea</u>					
1.						
2.						
3.						
4.						
5.						
Program Course Requirements:						
The overall course sequence should be reviewed to ensure that appropriate training in quantitative methods (e.g. statistics and/or computer science) is included.						
<u>UW Courses, Title and Number</u> <u>Cree</u> First Year Courses:	edits					
Mid-Level Courses: (2 courses from 2 areas in Neuroscience)	<u>edits</u>					

UW Courses, Title and Number

Quantitative Methods:

Credits

	se of study was accepted	date	
Signatures:	Student	Major Professor	
Committee Sign	natures:		

Advanced Courses:

Please return completed form to the Program Office, 7225 Medical Sciences Center.

Additional Signatures (if applicable)

NEUROSCIENCE TRAINING PROGRAMCertification for the Ph.D. Degree and Training Record

PART II

<u>NAME</u>

A. <u>PRELIMINARY EXAMINATION</u>

1. **Outside-area Paper**.

Title of Paper:

Brief description of topic covered:

2.	Thesis Proposal . Title of proposal:		
	Brief description of pr	roposed dissertation research:	
Date of	outside-area paper and p	proposal accepted:	
Comn	nittee Signatures:		(Major Professor)

NEUROSCIENCE TRAINING PROGRAMCertification for the Ph.D. Degree and Training Record

PART III

<u>NAME</u> TEACHING A. Each student must teach at least one full semester in a substantial neuroscience or related course. Course(s) Taught Credit Hours Responsibility B. **RESEARCH PRESENTATIONS** Each student will make an informal presentation of his/her thesis proposal in the Neuroscience Seminar. Date of presentation: Title of presentation: C. **DISSERTATION MEETING** Date of agreement on style and content of written dissertation: Expected date for thesis defense: Committee Signatures: _____(Major Professor)