DEPARTMENT OF MOLECULAR BIOLOGY AND MICROBIOLOGY

Molecular Biology and Microbiology Program Molecular Virology Program, Cell Biology Program

QUALIFYING EXAM REPORT

To be completed by the Committee Chairperson and submitted to the departmental office as soon as possible following the Research Qualifying Exam

Student's Name:	Date of Committee Meeting:			
Rate on a scale of 1 (outstanding) to 5 (poor):	Quality of Written Proposal	Feasibility of Project	Knowledge	Presentation
Chair signature	-			
Name (printed):				
Advisor signature	-			
Name (printed):				
Member signature				
Name (printed):				
Member signature				
Name (printed):				
Member signature				
Name (printed):				
Action Taken (please mark corresponding box ar	nd comment as	appropriate):		
☐ PASS:				
☐ PASS-Minor Revisions. Proposal to be revise	d and returned	I to Committe	e Chair withi	n 2 weeks.
☐ CONDITIONAL PASS-Major Revisions. Reme	edial action rec	juired. Note o	date of comp	letion:
☐ FAIL:				

Chair's R	Report	
Please	summarize the strengths, weaknesses, and feasibility of t	the proposal:
Please	comment on the student's exam performance:	
Are the	re any manuscripts in preparation or in press?	
Student's	s Update	
l've con	npleted the online "Planned Program of Study" (School of	Graduate Studies website) TYES No.
Signature:	Student	Date:
Signature:	Advisor	Date:
	t has completed 24 letter-graded credit hours of coursewo	ork, and the Advancement to Candidacy form has
Signature:	Department Office	Date:
Approved:	Department Chair/Program Director	Date:

Comments: Use separate sheet if needed