



DEPARTMENT OF ENTOMOLOGY

Report of Research Advisory Committee Meeting

Student Name: _____ Meeting Date: _____

Degree Sought: _____

Comments: Please comment briefly on the content of the meeting, whether progress has been adequate, and what is planned for the upcoming year. Constructive criticism here can be very helpful for the student's continued improvement.

Committee Members - Name & Signature

Date

_____ (Advisor)	_____
_____ (Co-advisor, if applicable)	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Student Name & Signature

Date

Please return this report to the Graduate Coordinator within one week of the date of the meeting (jkiner@umd.edu, 4112 Plant Sciences Building).