Student Performance Evaluation (Form I)
Graduate Program Assessment
Department of Crop and Soil Sciences
University of Georgia

Each member of the Advisory Committee should fill out this form at Oral Preliminary Exams and at Dissertation/Thesis defenses. The forms should be returned to the Graduate Coordinator.

Student Name ___________________________ Evaluation Date ______________________


Please rate each area with a scale of 1 to 10
1 indicates poor preparation
10 indicates outstanding performance

________________________
General knowledge of Crop/Soil Sciences

________________________
Knowledge in Specialty Area

________________________
Communication Skills

   Written

   Oral

   One-on-one

________________________
Research Problem Solving

   Ability to organize and define problem

   Ability to assemble resources

   Ability to integrate and evaluate resources

   Creativity

   Ability to organize research and carry it through

   Ability to evaluate results

 Comments: