Due Progress Advisory Document for Ph.D. Degree

Please type information before printing

Date:			
Student Name: Student ID #			
Degree: Computing: □ Cor	nputer Science: □ T	rack:	
Semester Admitted:	# of se	emesters in the program	
Advisor:		_	
Committee:			
ectivity	Good Progress	Acceptable Progress	Completed Semester
dentify Advisor	1 semester	2 semesters	
rogram of study approved by dvisor and initial committee	4 semesters	5 semesters	
Complete teaching mentorship	4 semesters	6 semesters	
Complete required courses	5 semesters	6 semesters	
ull committee formed	6 semesters	7 semesters	
rogram of Study approved by ommittee	6 semesters	7 semesters	
Vritten qualifier	5 semesters	6 semesters	
Pral qualifier/Proposal	7 semesters	8 semesters	
Pissertation defense	10 semesters	12 semesters	
inal document			
 Has the student met due Describe the progress the 			
Student Signature		Date	
Advisor signature			