**MGM Preliminary Examination Summary**

Student Information: (student completes)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Student Name:  |       |  |  **Meeting Date:**  |       |
| **Prelim Chair:**  |       |  |  **Dissertation Advisor:**  |       |
| **Student Incoming Year:** |       |  |  |  |
| **Proposed Research Project Title:** |       |

Preliminary Examination Committee Members: (student completes)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1.** |       | **3.** |       | **5.** |       |
| **2.** |       | **4.** |       | **6.** |       |

Meeting Synopsis:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Excellent (1.0) | Very Good | Good | Average | Satisfactory | Poor (6.0) |
| Oral presentation skills  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| General knowledge in proposed research area | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| Written Document | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |

Summary of Preliminary Examination and comments to be conveyed to the student:

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|       |

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| --- | --- |
| Committee Member Name : |       |

***Please email the completed form or hand the paper copy to the student.***