

PURDUE UNIVERSITY **Second Year** Research Evaluation Form - COMMITTEE
Department of Chemistry

Student Name:

Date:

Research Title:

Advisor Name:

Committee Member Completing Form:

OVERALL EVALUATION	(Unacceptable)	(Acceptable)	(Outstanding)
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Comments explaining evaluation:

Description of student's strengths and weaknesses

Are this student's overall plans for next year reasonable? Yes No

Would the idea outlined in the One Pager/Specific Aims document be a suitable topic for an Original Proposal? Yes No

Provide any additional feedback about the suitability of the student's One Pager/Specific Aims idea as an OP topic (Optional)

Committee Signature	
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