



WAYNE STATE
School of Medicine

Anatomy and Cell Biology
Master's Program

Department of Ophthalmology,
Visual and Anatomical Sciences

Summer Research and Timeline Assessment
Masters of Science

NOTE: This form must be submitted to the Master's Program Graduate Director after the conclusion of the Summer Term of Year 1. The student and Advisor should assess the degree to which the summer research expectations were achieved, highlighting both accomplishments and obstacles. In addition, the Timeline listed in the Research Proposal and Timeline Form should be re-assessed based on the progress made during the Summer Term. The expectations for this new Timeline should be as specific as possible and mutually agreeable. The deadline for this form is August 15th of Summer Term.

Student's Name: _____ Access ID (e.g., aa1234): _____

Email: _____ Phone: _____

Project Name: _____

Student Self-Assessment of Summer Research Expectations and Accomplishments:

Advisor Assessment of the Summer Research Expectations and Accomplishments:

Timeline:

Names

(Print/Type Names)

(Access IDs)

Signatures

(Sign Names)

(Date)

Advisor

Access ID

Advisor

Date

Student

Access ID

Student

Date

Master's Program Graduate Director

Access ID

MS Program Graduate Director

Date