

**THIS FORM IS FOR PREVIEW PURPOSES ONLY AND WILL NOT BE ACCEPTED FOR SUBMISSION.**

**PLEASE INITIATE FORM IN DOCUSIGN**

## FORM GSBS07: STUDENT THESIS RESEARCH ADVISORY COMMITTEE MEETING REPORT

### Instructions

**STUDENT:** Please schedule your TRAC meeting and report your meeting date in Blackboard Learn at least one week before your meeting. Please initiate this form prior to your TRAC meeting. Your TRAC chair will use this form to assess your progress and development at your annual TRAC meeting.

You must have a TRAC meeting each year to make Satisfactory Academic Progress.

**TRAC CHAIR:** Please complete pages 1-3 and submit.

*If the student has been given authorization to schedule their defense, please use form GSBS70: TRAC Approval of Proposed Dissertation Timeline.*

### Student and Meeting Overview

Student:

Year of matriculation at UMass Chan:

Program:

Date of TRAC Meeting:

- Student HAS met all advanced elective requirements
- Student HAS NOT met all advanced elective requirements
- TRAC Chair has received and reviewed the report from the previous meeting
- TRAC met with the student alone
- TRAC met with the thesis mentor alone

### Signatures

Role	Name	Signature	Date
Student			
Thesis Advisor			
Co-Thesis Advisor			
TRAC Chair			
Graduate Program Director			
Graduate Program Co-Director			
Graduate Program Co-Director			
TRAC Member 1 (if attended)		N/A	N/A

TRAC Member 2 (if attended)		N/A	N/A
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## Instructions to TRAC Chair

Please assess the student's progress and development in the areas below using the following rubric:

- "Yes" indicates that the student is consistently showing stage appropriate progress.
- "Partial" indicates that the student is inconsistently showing stage appropriate progress.
- "No" indicates that the student is not making the expected progress.
- "N/A" = not applicable.

Student:

Date of TRAC Meeting:

## Evaluation

I. Research Progress and Knowledge Base	Yes	Part	No	N/A
A. Has the student identified a novel research question of significance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
B. Does the student demonstrate knowledge or mastery of previous research, scientific literature and other foundational material related to their project?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Has the student made adequate research progress since the previous TRAC meeting (if not applicable, select N/A)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Does the student demonstrate appropriate scientific independence?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

II. Data Generation and Analysis	Yes	Part	No	N/A
A. Can the student execute research protocols to generate reproducible data?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
B. Does the student use appropriate controls for their experimental work and consider controls when drawing conclusions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Does the student use appropriate statistical methods when drawing conclusions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

III. Problem-solving ability and critical thinking	Yes	Part	No	N/A
A. Was the student able to independently field questions about their thesis research?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
B. Does the student critically evaluate their results and consider alternative hypotheses?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Can the student identify underlying issues to troubleshoot and modify protocols when necessary?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

IV. Communication skills	Yes	Part	No	N/A
A. Was the Pre-TRAC report well written, conveying the project goals and progress to date?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

B. Were the data presented in a clear and comprehensible fashion?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Did the presentation have the appropriate balance of background, methods, results, conclusions, and implications and was organized in a logical manner?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Advanced stage-specific criteria (answer only 'Yes' or 'No'.)**

Year 4	Yes	No
Does the student have a well-developed thesis project?	<input type="checkbox"/>	<input type="checkbox"/>

Year 5+	Yes	No
A. Has the student published at least one first-author research paper or has developed a first-author manuscript outline or draft? If not, the TRAC Chair must address this issue in the summary.	<input type="checkbox"/>	<input type="checkbox"/>
B. Is the student near completion, having accomplished most of their research goals? If not, the TRAC Chair must address this issue in the summary.	<input type="checkbox"/>	<input type="checkbox"/>
C. Did the student discuss their post-graduate plans and are they engaged in career development activities?	<input type="checkbox"/>	<input type="checkbox"/>

## Outcome

The student's progress is:  Satisfactory  Unsatisfactory

Final Grade:  Pass  Marginal Pass  Fail

*If the outcome was "Satisfactory", but the student received three or more "partial" and/or "no" scores, please attach a written justification for the satisfactory outcome.*

*If the student receives three or more "partial" and/or "no" scores, please attach a written remediation plan to be reviewed by the graduate director and schedule another TRAC meeting within six months.*

Student should meet with committee again in:  6 months  1 year  Other (please define)

Recommendation (if applicable):  Switch to MS exit  Withdrawal from the Graduate School

## Overall Evaluation

*Use this space to summarize the student's progress and any other important issues that were raised during the meeting that are impacting the student's research and/or academic progress.*

## Attachments

*Please attach any required justifications, remediation plans, or other necessary documents here.*



**GSBS Office Use**

PSCS ID:

Checklist Updated

Office Staff:

Date:

*Distribution: All signers*