Michigan State University – School of Packaging
Annual Progress Report for Plan A Master's Students

Name ________________________________ Student PID Number ____________________

Portion Completed by the Student

Academic Progress

A copy of the current program of study should be attached to this report.

Date of entrance into program* ___________ Anticipated completion date ____________
*If admitted under provisional status, date provisional status removed: ______________

Most recent contact with the guidance committee/academic advisor: ______________

Date or expected date of thesis proposal approval ______________________________

Date or expected date of thesis defense ________________________________

Current GPA: ___________ Number of credits below 3.0: ______________________

Remaining required courses:

Has Academic Program Plan been completed and signed? Yes    No

Professional Performance and Potential

The student should attach the following information:

1. Professional goal statement
2. Goals for the next academic year
3. Papers published or submitted
4. Presentations at professional conferences
5. Participation on funded grants
6. Participation in undergraduate education (e.g. courses taught, mentoring of undergraduates)
7. Other

Comment briefly on your progress in achieving your academic goals during the past year. Note areas in which you are experiencing any difficulty:
Comment briefly on your progress toward achieving your career goals during the past year. If you feel you are not making progress, explain why. Include perceived departmental/school obstacles that hinder your program:

---

**Portion completed by the Major Professor**

**Academic Performance**

1. Has the student made acceptable progress during the evaluation period? Please comment below.

2. Please comment on the overall academic performance of the student, including teaching experiences, if applicable.

---

**Student**

Your signature below indicates that you have discussed the contents of this progress report with your major professor.

Student _______________________________ Date ________________

**Major Professor**

Your signature below indicates that you have discussed the contents of this progress report with the student.

Academic Advisor/Program Director ______________________________ Date ________________

Dept/School Chair/Director ______________________________ Date ________________

When both the major professor and student have reviewed and signed this progress report, copies of the report should be given to the student and the major professor. The original progress report should be placed in the student's file in the department/unit office. Students who wish to appeal any part of the major professor's evaluation may do so in writing to the department chair/school director.