

**Student Performance Evaluation (Form 1)**

Graduate Program Assessment  
Department of Crop and Soil Sciences  
University of Georgia

Each member of the Advisory Committee should fill out this form at Oral Preliminary Exams and at Dissertation/Thesis defenses. The forms should be returned to the Graduate Coordinator.

Student Name \_\_\_\_\_

Evaluation Date \_\_\_\_\_

Oral Preliminary Exam

Dissertation Defense

Thesis Defense

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**Please rate each area on a scale of 1 to 10:  
1 indicates poor preparation; 10 indicates outstanding performance**

General knowledge of Crop/Soil Sciences \_\_\_\_\_

Knowledge in Specialty Area \_\_\_\_\_

Communication Skills

    Written \_\_\_\_\_

    Oral \_\_\_\_\_

    One-on-one \_\_\_\_\_

Research Problem Solving

    Ability to organize and define problem \_\_\_\_\_

    Ability to assemble resources \_\_\_\_\_

    Ability to integrate and evaluate resources \_\_\_\_\_

    Creativity \_\_\_\_\_

    Ability to organize research and carry it through \_\_\_\_\_

    Ability to evaluate results \_\_\_\_\_

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Comments: