

Harrison School of Pharmacy  
Department of Pharmacy Care Systems  
Academic Progress Annual Report  
Deadline May 15

---

To be completed by the student

A copy of the current plan of study and a copy of transcript should be attached to this report.

Date

Your name

Program enrolled \_\_\_\_\_ Master's program  
(check one) \_\_\_\_\_ Doctoral program

Thesis/dissertation  
advisor

Date admitted to  
the program

Current cumulative  
GPA

Number of credits  
below B (including  
an incomplete)

Date (or expected  
date) of plan of  
study submission

Number of remaining  
required courses  
indicated in the  
plan of study

Date (or expected  
date) of  
comprehensive exam  
(Doctoral students  
only)

Date (or expected  
date) of  
thesis/dissertation  
proposal approval

Date (or expected  
date) of final  
thesis/dissertation  
defense

Thesis/Dissertation Committee:

Please describe the following information:

**Goals:**

1. Professional goal statement. Please consider including both academic and career goals
  
2. Goals for the next academic year

**Accomplishments:**

For questions 3-5, please organize your works in chronological order with complete titles, authors and citation.

3. All manuscripts published or submitted to peer reviewed journals since admission into the program
  
4. All abstracts published since admission into the program

5. All presentations at conferences since admission into the program

6. Grants for research and travel (list full name of the grant, funding agency, date, and amount of grant since admission into the program)

Applied For:

Received:

7. Awards and honors received since admission into the program

**Activities:**

8. Scientific meetings attended (list complete name and date(s) of meeting(s) during Summer 2008 - Spring 2009)

9. Research project(s) that you actively participate in (not including your own thesis/dissertation; list full name of research projects and faculty supervisors)

10. Participation in professional (PharmD) curriculum (list courses taught and/or assisted)

11. Other professional/research activities

Comments:

12. Briefly comment on your progress in achieving your academic goals during the past year. Note areas in which you are experiencing any difficulty and which areas you would like to make an improvement.

13. Briefly address any barriers/challenges that hinder your progress in the program and your future plan to address them.



---

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

Student \_\_\_\_\_ Date \_\_\_\_\_

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

Major Advisor \_\_\_\_\_ Date \_\_\_\_\_

Dept Head \_\_\_\_\_ Date \_\_\_\_\_

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