# Biostatistics PhD Student
## Annual Mentoring Plan and Review
### of Progress toward Goals

**Student:** ___________________________________________________________  **UFID:** __________  **Date:** __________

- [ ] Full-time  [ ] Part-time  [ ] Year In Program: _________
- [ ] Annual Plan Submission (Early Fall Semester)  [ ] Progress Review Toward Goals (Late Spring Semester)
- [ ] Primary Mentor (or)  [ ] PhD Supervisory Chair:

## Mentoring Plan and Review (Completed By Student)

<table>
<thead>
<tr>
<th>Annual Goals</th>
<th>Progress Towards Goals:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Education</strong> (Include coursework, extracurricular certifications, training, or workshops)</td>
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<tr>
<td><strong>Degree Planning And/or Post-Degree Planning</strong> (qualifying exam, funding proposals, dissertation, future funding sources, potential post-doc opportunities)</td>
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Progress Towards Goals:
<table>
<thead>
<tr>
<th>Research</th>
<th>Progress Towards Goals:</th>
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<tbody>
<tr>
<td>(publications, presentations, meetings, other professional activity, proposals submitted/planned, networking, and meeting new collaborators)</td>
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<tr>
<th>Service and Professionalism</th>
<th>Progress Towards Goals:</th>
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<tr>
<td>(including revisions, organizations, memberships, leadership, committees, community service)</td>
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**Faculty Assessment / Recommendations** (Completed By Primary Mentor / Supervisory Chair)

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› Signatures:

- **Student:** __________________________   **Date:** ________________
- **Primary Mentor / Supervisory Chair:** _____________________________   **Date:** ________________
- **Secondary Mentor / Other Members Present for Mentoring Meeting:** _____________________________   **Date:** ________________
- **Director of Graduate Studies:** _____________________________   **Date:** ________________