

Master's Thesis Grading Form

The academic advisor should complete this form with input from all committee members.

Student first name

Student last name

Committee chair first name

Committee chair last name

Other Committee Members

First name

Last name

Date (mm-dd-yyyy): _____

Title of Thesis:

Score (based on consensus of committee members)

4 = excellent 3 = good 2 = meets expectations 1 = does not meet expectations

_____ Understanding of public health importance

_____ Strength of conclusions/ recommendations

_____ Review of the literature

_____ Quality of writing (grammar, organization)

_____ Grasp of study design and statistical analysis

_____ Oral defense (clear and concise)

_____ Overall score

Comments:

Please forward completed forms for departmental retention to Amy L. Rhodes, Epidemiology Student Services Specialist (rhodesa@edc.pitt.edu).