



LATE FALL ADVISORY COMMITTEE MEETING

Complete this form with your advisory committee and return it to the Biophysics Coordinator
in late October – early November of your first year.

Student name: _____

UID: _____

Committee members: 1. _____
2. _____

Date: _____

FALL COURSES (& EXPECTED GRADES)

- 1. _____
- 2. _____
- 3. _____
- 4. _____

SPRING COURSES

- 1. _____
- 2. _____
- 3. _____
- 4. _____

SPRING TA / RA INFORMATION

____ TA Department: _____
____ RA Professor: _____

ROTATIONS

Professor / Research Group	Status
1. _____	_____
2. _____	_____
3. _____	_____

RESEARCH INTEREST

STUDENT COMMENTS

COMMITTEE COMMENTS