Receive by………………

 Date…….……………….

**GRADUATE STUDENT**

**SEMI-ANNUAL PROGRESS REPORT FORM**

**FACULTY OF PHARMACY, SILPAKORN UNIVERSITY**

This form is to be filled by all graduate students seeking the Ph.D. degree by January, 15th and June, 15th each year, after finishing the semester until graduation.

 **Year………/ Semester…………**

**1. General data**

Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Degree Sought: □ Graduate Diploma □ Master Degree □ Doctoral Degree

Program of Study: .............................................................................................................□ Part-time □ Full-time

 □ Thesis only, Plan………. □Thesis& Course work, Plan……...□ Independent study, Plan……

Year/Semester Admitted: \_\_\_\_\_\_\_\_ Year in Program: \_\_\_\_\_\_\_\_\_Years \_\_\_\_\_\_\_\_\_Months

FOREIGN LANGUAGE: Grade □ S □ U

**2. Course work**

|  |  |  |  |
| --- | --- | --- | --- |
| **Code/Course** | **Credits** | **Grade** | **Year/Semester** |
| 1.  |  |  |  |
| 2.  |  |  |  |
| 3.  |  |  |  |
| 4.  |  |  |  |
| 5.  |  |  |  |
| 6. |  |  |  |
| 7. |  |  |  |
| 8. |  |  |  |
| 9 |  |  |  |
| 10. |  |  |  |
| 11. |  |  |  |
| 12. |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Total Credits Earned: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GPA: \_\_\_\_\_\_\_\_

**3. Seminars**

|  |  |
| --- | --- |
| **Topic** | **Date** |
| 1.  |  |
| 2.  |  |
| 3. |  |
| 4. |  |

**4. Qualifying Examination / Comprehensive Examination**

□ Expected date to be taken: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ Comprehensive Examination □ Passed □ Failed Date \_\_\_\_\_\_\_\_\_\_\_\_

□ Qualifying Examination □ Passed □ Failed Date \_\_\_\_\_\_\_\_\_\_\_\_

**5. Thesis Proposal**

Expected date of Proposal Defense: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Proposal Defense Exams: \_\_\_\_\_\_\_\_\_\_\_­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_

Result: □ Passed □ Failed □ Conditional Pass

Thesis Proposal approved: Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**6. Thesis**

Title : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Major Advisor 1.

 Co-Advisor 2.

 3.

|  |  |  |  |
| --- | --- | --- | --- |
| Semester | Lab work(% of progression) | Data Collection(% of progression) | Literature Review(% of progression) |
| 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 4 |  |  |  |
| 5 |  |  |  |
| 6 |  |  |  |
| 7 |  |  |  |
| 8 |  |  |  |
| 9 |  |  |  |
| 10 |  |  |  |
| 11 |  |  |  |
| 12 |  |  |  |
| 13 |  |  |  |
| 14 |  |  |  |
| 15 |  |  |  |
| 16 |  |  |  |

Dissertation defense: Expected date to be taken \_\_\_\_\_\_\_\_\_ Date taken \_\_\_\_\_\_\_\_\_

Has final dissertation been submitted? □ Yes □ No

**7. Publication/Presentation**

**Submitted or published papers**: □ Yes □ No

1. Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Journal

Year Vol. No. Page

 Status: □ in preparation □ submitted □ accepted

 Granted by

Received Award

 □ National □ International

 □ Review Article □ Original Article

 **ซึ่งปรากฏในฐานข้อมูลสากล ดังนี้**

 □ ISI ค่า Impact factor ปี..................... ค่า..........................

 □ Web of Knowledge □ Scopus □ Agricola

 □ BIOSIS □ CINAHL □ EiCOMPENDEX

 □ ERIC □ H.W.Wilson □ Infotrieve

 □ INSPEC □ Ingenta Connect □ MathSciNet

 □ MEDLINE/Pubmed □ Pubmed □ PsycINFO

 □ ScienceDirect □ SciFinder □ Academic search premium

 □ Social Science Research Network

**Presentation**  □ Yes □ No

 1. Title

 Name of Conference

Place

Date □ Oral or □ Poster

 Granted by

Received Award

 2. Title

 Name of Conference

Place

Date □ Oral or □ Poster

Granted by

Received Award

 Etc.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of Student Date

**For thesis or academic advisor**

1. Rate the student’s progress towards the Ph.D. degree, on a scale of 1 to 4:

(1) Strongly Satisfactory

(2) Weakly Satisfactory

(3) Weakly Unsatisfactory

(4) Very Unsatisfactory

2. How often do you individuallymeet with the student?

□ Once a week □ Once in 3-4 weeks □ Once a year □ etc

 3. Estimated date for the next milestone in the student’s progress (Proposal /Final Defense).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of Advisor Date

For more comments, use additional pages if necessary.

(PLEASE RATE THE STUDENT’S PERFORMANCE, THEN SEAL THE ENVELOPE AND MAIL/EMAIL IT TO Ms.Chonlada Arpanurak (arpanurak\_c@su.ac.th)