

Thesis Progress Report

Graduate Student:

Name

E-mail

Committee Chairperson:

Name

E-mail

Advisor:

Name

E-mail

Co-advisor (if any):

Name

E-mail

**Name(s) of Additional
Committee Member(s):**

Name

Name

Name

**Date of Current
Thesis Committee Meeting:**

MM/DD/YYYY

**Date of Previous
Thesis Committee Meeting:**

MM/DD/YYYY

**Anticipated Date of Next
Thesis Committee Meeting:**

MM/DD/YYYY

Date Entered Program:

MM/YYYY

Thesis Committee Meetings are required annually per BE policy.

The Student sections should be completed prior to the Thesis Committee Meeting.

Student *Research update — In this meeting, I seek feedback on the following aspects of my project(s):*

--

Chairperson *Comments:*

--

Please see back of form for additional topics and the signature line for the Thesis Committee Chairperson.

Student *Career goals:*

--

Chairperson *Comments:*

--

Student *Current timeline for graduation:*

--

Chairperson *Comments:*

--

Student *Other topics to discuss:*

--

Chairperson *Comments:*

--

Signature of Committee Chairperson

Date

Please return this form by email to: be-grad-office@mit.edu or deliver the hard-copy to the BE Academic Office in 16-267 within 2 weeks following the Committee Meeting.