



Portfolio Evaluation Summary

Student Information

Name: _____

ID# _____

Faculty advisor _____

Program entry date _____

Projected completion date _____

Evaluation

Pass _____ (number voting)

Fail _____ (number voting)

Major revisions _____

Minor revisions _____

Summary of Recommendations

Signatures

Faculty Advisor Signature

Date

Faculty Review Panel Member

Date

External Evaluator Panel Member

Date