



Department of Biological Sciences

Form 1: Semester Evaluation Form for BS-MS (5th yr); and IPhD (1st, 2nd, 3rd yr)

Name of the Student:	
ID Number:	
Project Title:	
Date of Presentation:	
Name of Thesis/Project Supervisor:	
Name of Thesis/Project Co-Supervisor (if any):	

Evaluation of *Presentation*:

	Name of Evaluators	Conceptual development (out of 10)	Content (out of 10)	Effort (out of 10)	Clarity, Style (out of 10)	Total (out of 40)
Evaluator 1						
Evaluator 2						
Supervisor*						
* Co-supervisor, if the Supervisor is not a faculty member of DBS						Total (out of 120)

Average of *Presentation* (out of 60):

Performance in lab (out of 40, by Thesis / Project advisor):

Total (out of 100):

Comments (to be shared with the student):

Grade (Leave Blank; to be entered by DBS):

Signatures with Date:

Evaluator 1

Evaluator 2

Supervisor/Co-supervisor