

Intermediate Evaluation

Thesis Director Report

** Please send to the LNDS coordinator for forwarding to the TAC **

Student (Last Name, First Name):	
Thesis Director (Last Name, First Name):	
Thesis co-Director (Last Name, First Name):	
Expected date for thesis defense (month/year)	

1. Progress of experimental work

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2. Academic progress

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3. State of publications

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4. Other achievements

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5. Student's contribution to the lab

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6. Minor or major problems

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(Ex: interaction with the students or between the student and other lab members, publications, access to technical equipment, availability of animals or drugs, etc)?

No problems to report

7. Conclusion

Thesis Director Thesis co-Director

Location & Date: