

**CHEMICAL BIOLOGY PHD PROGRAM  
DISSERTATION ADVISORY COMMITTEE REPORT**

*STUDENT SHOULD BRING THIS FORM TO THE MEETING  
THIS FORM TO BE COMPLETED AND SIGNED BY ALL IMMEDIATELY UPON CONCLUSION OF THE MEETING, AND SUBMITTED  
TO THE PROGRAM COORDINATOR*

Student may begin writing dissertation

Student: \_\_\_\_\_ Program: **Chemical Biology**

Dissertation Advisor: \_\_\_\_\_ Year G.S.A.S.: \_\_\_\_\_

**ADVISORY COMMITTEE:**

**SIGNATURES:**

- 1. Chair: \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_

Meeting Date: \_\_\_\_\_

Date for Next Meeting: \_\_\_\_\_

Expected Date of Dissertation Defense: \_\_\_\_\_

PLEASE RETURN TO PROGRAM COORDINATOR:  
**Chemical Biology Program Coordinator**  
**200 Longwood Ave, Alpert 536**  
**Harvard Medical School**  
**617-432-5202**

|  |  |
|--|--|
| <input type="checkbox"/> YES <input type="checkbox"/> NO | The Dissertation Advisor has disclosed source(s) of support, holdings, and consulting arrangements that may pose potential conflict (see Conflict of Interest Disclosure Form) |
| <input type="checkbox"/> YES <input type="checkbox"/> NO | Have source(s) of support, holdings, and consulting arrangements changed since the last DAC meeting?   |
| <input type="checkbox"/> YES <input type="checkbox"/> NO | Is the student on a plausible track towards completion?  |
| <input type="checkbox"/> YES <input type="checkbox"/> NO | Has the student finished course requirements?  |
| <input type="checkbox"/> YES <input type="checkbox"/> NO | Has the student finished TA requirements?  |

**RESEARCH PROGRESS SINCE LAST REPORT:**

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**RECOMMENDATION(S):**

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**\*YEAR G5 ONLY:**

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|---|---|
| <input type="checkbox"/> <input type="checkbox"/> YES <input type="checkbox"/> <input type="checkbox"/> | Will the dissertation research be completed before May of Year 5? |
| NO  |   |

If YES: Signature of DAC Chair \_\_\_\_\_

If NO: Detail Timeline/Plans to Degree

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**Next DAC Meeting to be Held within 3 Months**