SCHOOL OF COMMUNICATION
WESTERN MICHIGAN UNIVERSITY

Master's Program

FORM IX: ANNUAL REVIEW OF ACADEMIC PERFORMANCE

_____
ACADEMIC YEAR

Student Name: _____ WIN #: _____
(PLEASE PRINT)

Admission Date: _____ Expected Graduation Date: _____

Faculty Advisor: _____
(PLEASE PRINT)

CAPSTONE OPTION: ☐ THESIS ☐ COMPREHENSIVE EXAM ☐ PROFESSIONAL PROJECT

Academic Progress Report *(final grade; to be completed by student)*

Communication Foundations course(s):
COM 6450 _____
COM 6820 _____
COM 6740 _____

Communication Research course(s):
COM 6010 _____
COM 6020 _____
COM 6050 _____

Capstone experience performance: ☐ Satisfactory progress
☐ Unsatisfactory progress

General academic performance:
Fall GPA _____
Spring GPA _____
Overall GPA _____

_____ _____
STUDENT SIGNATURE DATE ADVISOR SIGNATURE DATE

Summary evaluation of academic performance: *(to be completed by Director of Graduate Studies)*

☐ Good standing ☐ Academic warning ☐ Probation
☐ Academic dismissal ☐ Continued probation
☐ Probation removed

APPROVED:

_____
DIRECTOR, GRADUATE STUDIES DATE

Copies: File / Student / Advisor REV 6/09