



Community Health Nursing MN Quarterly Progress/Planning Form

Table with 4 columns: Name of Student (Last, First, MI), Year Admitted, Date of Advisement (Quarter, Year), Status (Full-time or Part-time)

You will need to complete this form every quarter you are enrolled as a student. Please complete the following sections of this form and email to your advisor at least 2 weeks before your quarterly advisement meeting.

This form will aid you and your advisor in keeping track of your progress as you continue through the CHN program and will serve as documentation of your quarterly advisement meetings.

I. ACADEMIC PLANNING

1. Please indicate your learning goals for this quarter:

2. Please list courses for which you are currently enrolled:

3. Please list courses you will register for next quarter (check the UW and Professional Continuing Education Time Schedules to verify course offerings):

II. REFLECTION ON LEARNING PROGRESS

1. What strategies have you used this quarter that have facilitated your learning?

2. What would you do differently next quarter? Why?

III. FINAL PROJECT PLANNING Circle One: Scholarly Project Thesis TBD

1. List 2 topic areas you are interested in exploring for your MN Thesis/Scholarly Project. Full-time students should complete for the 1st Quarterly Advisement Meeting:

2. Please state your finalized MN Thesis/Scholarly Project topic. Consider your own scholarly practice and/or research interests and list of projects proposed by CHN faculty. Full-time students should complete for the 2nd Quarterly Advisement Meeting:

3. Describe your progress on your MN Thesis/Scholarly Project this quarter:

4. Describe what progress you anticipate making on your MN Thesis/Scholarly Project next quarter:

**IV. SUPERVISORY COMMITTEE**

List Supervisory Committee Chair. Full-time students should complete for 2nd Quarterly Advisement Meeting:

List Committee Members. Full-time students should complete for 3rd Quarterly Advisement Meeting:

**V. STUDENT ACCOMPLISHMENTS**

Please list any awards or scholarships you have applied for or received, scholarly activities (e.g., conference abstract submission or presentation), or any professional or community service you have completed this quarter:

**VI. FACULTY ASSESSMENT OF STUDENT PROGRESS**

**VII. STUDENT AND FACULTY SIGNATURES**

Student Signature

Date

Faculty Signature

Date

Circle One: Academic Advisor or Supervisory Committee Chair

Faculty Name (printed)