Forest Ecosystems and Society Graduate Program | Learning Outcomes (LO) Assessment

| Student Name: | Degree (Circle) | M.F. | M.S. | Ph.D. Prelim | Ph.D. Final |
|---------------------|-----------------|------|------|--------------|-------------|
| FES Representative: | Date of Exam: | | | | |
| | | | | | |

| Assessment: Please indicate the <u>NUMBER</u> of co Learning Outcome (LO) Category (Please see the attached guidelines for the full LO wording of each category): | Does <u>Not</u> Meet Expectations (Put <u>NUMBER</u> of votes) | Meets Expectations (Put <u>NUMBER</u> of votes) | Exceeds Expectations (Put <u>NUMBER</u> of votes) | Comments (Note any special praise or concern If unable to observe or evaluate LO, note reason | |
|--|---|---|---|---|--|
| Research Skills | | | | | |
| Disciplinary Skills and Knowledge | | | | | |
| Ethics and Responsibilities | | | | | |
| Interdisciplinary Collaborative Problem Solving | | | | | |
| Communication Skills (e.g., written, verbal) | | | | | |
| Critical Thinking and Critical Awareness Skills | | | | | |
| Policy Analysis and Interpretation | | | | | |
| Teaching (if applicable, otherwise leave blank) | | | | | |

| Scholastic Outputs: Indicate the <u>NUMBER</u> (put '0' if none) of each type of output produced (or expected) as a result of the student's degree program. | Published or Accepted (Put <i>NUMBER</i>) | Currently in Review (Put <i>NUMBER</i>) | Anticipated in the Future (Put <i>NUMBER</i>) |
|--|--|--|--|
| Peer-reviewed or refereed publications (e.g., journal articles, book chapters) | | | |
| Non-peer reviewed or non-refereed publications (e.g., technical reports) | | | |
| Oral presentations or posters at professional conferences or meetings | | | |
| Other (please describe): | | | |

| Defense Outcome | Does NOT pass | Pass with 1 dissenting vote | Pass with no dissenting votes | | |
|--|---------------|-----------------------------|-------------------------------|--|--|
| (Please check one box) | | | | | |
| Future Actions: Please attach a summary (including timeframe) if any remedial or future actions are requested of this student. | | | | | |

| Major Professor Name: | Initial: | |
|-------------------------|----------|--|
| Comm. Member Name: | Initial: | |
| Grad Council Rep. Name: | Initial: | |

Student Acknowledgement: I have read this assessment and understand the results.

Student Signature Date