



2025 Partial Report – Research Training Program in Podiatric Medicine and Surgery

Student Name:

Mentor's Name:

Abstract (150–200 words)

Continuation Decision (*to be completed by Program Director and Associate Dean of Research*)

Academic Standing (informed to the Director of Research Training Program by Assessment Team)

- ☐ Excellent – Strong academic performance in SOPM modules and/or rotations
- ☐ Satisfactory – Meets minimum academic requirements, consistent in assignments
- ☐ Needs Improvement – At risk of falling

Comments (if any): _____

Attendance Standing (informed to the Director of Research Training Program by Module Leads)

- ☐ Excellent – No unexcused absences, consistently attends all scheduled sessions; actively engages with coursework and research activities (including lecture series attendance)
- ☐ Satisfactory – Occasional excused absences, communicates proactively with mentor and faculty
- ☐ Needs Improvement – Frequent unexcused absences impacting research progress

Comments (if any): _____

- ☐ Student may continue in the Research Training Program for Spring Semester/2026
- ☐ Student will stop participation in the Research Training Program

Director's Comments:

Mentor's Signature: _____

Date: _____

Mentee's Signature: _____

Date: _____

Director's Signature: _____

Date: _____

Associate Dean of Research: _____

Date: _____