

**TEXAS TECH UNIVERSITY  
DEPARTMENT OF HUMAN DEVELOPMENT AND FAMILY STUDIES  
HDFS MASTER'S SPECIALIZATION**

**STUDENT EVALUATION FORM**

Please complete the following and return directly to the student's advisor

Grade student received in your courses:	Course No. and Name	Grade
	_____	_____
	_____	_____
	_____	_____

Based upon any experiences you have had with this student, please rate the following on a 1-5 scale (1 – lowest, 5 – highest).

**RATING**

- \_\_\_\_\_ 1. Capability of completing work in the program specialization.
- \_\_\_\_\_ 2. Degree of fit between student ability/interests and program specialization.
- \_\_\_\_\_ 3. Organizational/time management skills.
- \_\_\_\_\_ 4. Writing skills.
- \_\_\_\_\_ 5. Potential for contributing to the discipline in specialization area (Primarily for Ph.D. candidates).
- \_\_\_\_\_ 6. In your opinion, should this student be admitted to candidacy in the program specialization (Yes, No, or comment below).

**COMMENTS**

\_\_\_\_\_  
Evaluator's signature

\_\_\_\_\_  
Date