

Diagnostic Review Of First-Year Students, 2007
Graduate Program in Sociology

To be completed by all first-year students. Note: add extra pages as needed. **Please complete this form and return with a current CV to the Graduate Secretary by April 16.**

Name: _____

Signature: _____ Date: _____

Advisor's Signature: _____ Date: _____

| Coursework | List Required Courses Planned/Completed | List Elective Courses Planned/Completed | Actual or Planned Prelim Date | Prelim Passed? |
|------------------|---|--|-------------------------------------|-------------------|
| Theory | <input type="checkbox"/> SOC701 <input type="checkbox"/> SOC702 | <input type="checkbox"/> _____ | | |
| Methods/Analysis | <input type="checkbox"/> SOC711 <input type="checkbox"/> SOC713 <input type="checkbox"/> SOC707 | <input type="checkbox"/> _____ <input type="checkbox"/> _____ | | |
| Area 1: _____ | <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ | <input type="checkbox"/> _____ <input type="checkbox"/> _____ | | |
| Area 2: _____ | <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ | <input type="checkbox"/> _____ <input type="checkbox"/> _____ | | |
| Minor: _____ | | <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ | | |
| Electives | | | | |

Comment on Course Performance or Content: