

John Jay College of Criminal Justice
PhD Program in Psychology
The City University of New York
445 West 59th Street
New York, NY 10019

First Doc Evaluation Form

Date: _____

Candidate: _____

Subprogram: _____

Title: _____

First Doc Mentor: _____

Campus: _____

Name of Evaluator: _____

Campus: _____

To the Evaluator: Please read the student's First Doc carefully before evaluating it on the scale below.

PLEASE SEND THE ORIGINAL TO THE EXECUTIVE OFFICE AND A COPY TO THE FIRST DOC MENTOR AND THE SUBPROGRAM HEAD. In the event that category "B" is checked, the evaluator should give the basis of his/her evaluation in the space allotted for "comments" below.

____ A. I approve the student's written doctoral First Doc as it now stands.

____ B. Except for minor revisions (as indicated below), I approve the student's written doctoral First Doc. I assume that the candidate's First Doc sponsor will assume responsibility for these revisions.

____ C. I do not approve the student's written doctoral First Doc as it now stands.

COMMENTS

Evaluator's Signature: _____

Send Original to Executive Officer and a Copy to the Subprogram head.