

Ph.D. PROGRESS REPORT FORM

This Form consists of 3 Parts:

Part 1: To be completed by the candidate and handed over to the Research Supervisor(s).

- For Full-time (FT) candidate, every 3 months (January, April, July & October)
- For Part-time (PT) candidate, every 6 months (January & July)

Part 2: To be completed by the Supervisor(s) after discussion with the candidate.

Part 3: To be completed by the Chair of the School Doctoral Committee (SDC) Annually.

REGISTRATION DETAILS					
Scholar's Name:					
School/Institute Name:					
Name of the Guide: Name of Co Guide: Name of External Guide (If any):					
JGU ID :	Registration Date://20				
REVIEW PERIOD	(PLEASE MARK WHICHEVER IS APPLICABLE)				
Full-Time (FT): JAN-MARCH 20_	, APRIL-JUNE 20, JULY-SEPT 20, OCT-DEC 20				
Part-Time (PT): JAN-JUNE 20	, □ JULY-DEC 20				
Topic of the Research:					
Name the courses which scholar has taken as a part of his / her course works (apart from Compulsory courses i.e. Qualitative Research Methodology, Quantitative Research Methodology, Academic Writing, Teaching & Learning Essentials and Research & Publication Ethics):					
1.	2.				
3∙	4.				
5•	6.				

PART 1: CANDIDATE'S SELF-ASSESSMENT ON PROGRESS

1.	I rate the overall quality of my	y work as:		
	☐ Very good ☐ Good	☐ Satisfactory	☐ Below r	ny expectations
2.	I assess my overall rate of pro	gress as:		
	☐ Very good ☐ Good	☐ Satisfactory	Below	my expectations
3.	In the last year have you:	_		_
	Given a departmental seminar	☐ Yes		No
	Attended any conference	☐ Yes		No
	Presented or published any paper	☐ Yes		□ No
	If yes, please give details;			
4	Ethical clearances			
4.	☐ Have been obtained	are pending	are not r	equired
5.	Are there any intellectual pro			
J.	Yes			
	If Yes, please give details;			
	ij i es, piease give aeiaiis,			
6.	Kindly indicate the frequency	of the contact with you	r supervisor (s);	
	☐ Once a week	☐ Once	a month or less	
	☐ Once in two weeks	☐ Any (Other	
_	77: 31: 3: 3:	. C		
7•	Kindly indicate the medium of Face to Face	Telep		
	☐ Email	☐ Any C		
0		•		□ No
	Submitted work to the superv		∐ Yes	∐ No
	Received written feedback from Do you have access to all the			□ No
10.	equipment, funds/lab/Resear			□ No
		ch papers/Library sup	port). 🗆 163	☐ 1 10
	If No, please give details;			
11	Briefly describe the work you	evnect to achieve in the	a navt raviaw nari	nd•
11.	Briefly describe the work you	expect to define ve in the	e next review perio	.
I ha	we discussed this progress report w	ith my supervisor:	Yes	□ No
	1 0 1	• 1		_
	Signature of the Candidat	e		Date:

Note: Please insert an additional sheet if you would like to add further comments.

PART 2: SUPERVISOR's COMMENTS

1.	Overall quality of work of the candidate:				
	☐ Very good ☐ Good ☐ S	Satisfactory	☐ Below my expectations		
2.	Overall rate of progress of the candidate:				
	☐ Very good ☐ Good ☐	Satisfactory	☐ Below my expectations		
3.	Comment on progress and achievements	since the last rev	riew period:		
1	Kindly indicate the frequency of the cont	act with your sur	pervisor (s)		
4.	Once a week	Once a mon			
	☐ Once in two weeks	☐ Any Other	HI 01 1000		
		·			
5 ·		-	sor (s);		
	☐ Face to Face	☐ Telephonic			
	☐ Email	Any Other			
6.	Is the supervisory team satisfied with the	e frequency and r	neans of contact?		
	☐ Yes	□ No			
	If No, please comment;				
7•	Are there any intellectual property issues ☐ Yes	s which have not ☐ No	been resolved?		
	If Yes, please comment;				
8.	We recommend that the candidate's enro	olment be;			
	☐ Continued ☐ Terminated	☐ Continued sub	ject to conditions outlined below		
	ml. C. H. J. S. L. L. S. L.		. 1. 1		
9.	The feedback given herein has been discu ☐ Yes	Sed with the car	ndidate;		
	□ 1es	□ N0			
	The candidate is required to submit the progress rep	ort form external / ir	nternal guide.		
		,			
Signature of the Supervisor		Signa	ture of the Co-Supervisor		
(In	nternal/External)		(If applicable)		
Date:			Date:		

Note: Please insert an additional sheet if you would like to add further comments.

PART 3: SDC COMMITTEE

Please comment on the candidate's progress and proposed thesis submission date as appropriate. If any concerns have been raised by the candidate or supervisor, please indicate in a separate memorandum what action has been taken and further recommend action.

Comments:				
SDC recommend that the candidate's enrolment	(and scholarship, if applicable) be:			
☐ Continued				
☐ Continued subject to conditions outlined below				
☐ Terminated				
SDC recommend that the alterations to registrat	ion be:			
☐ Approved	☐ Not approved			
SDC recommend for final thesis submission on t seminar) presentation.	the basis of abstract (pre-submission			
☐ Yes	□ No			
Signature of the SDC Committee Head	Date:			
Note: Please attached additional sheet if necessary				