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| **Supervisor Bi-annual Progress Report** | | | | |
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| Student Name: | | Student ID: | | Filled by EJSP Administration |
| KSU Department / College: | | External Institution: | |
| External Supervisor: | | Enrolled since: | |
| Internal Supervisor: | | Standard Period of Study: Years | |
| Expected thesis submission date: | | Current Study year: | |
| Research Area: | | | |
| Thesis Proposal Title: | | | |
| Period covered by this report: from to | | | |
| 1. I rate the overall quality of the student’s work as:   🞏 Excellent 🞏 Good 🞏 Satisfactory 🞏 Below acceptable standard 🞏 Not known   1. I assess the overall rate of progress or the student as:   🞏 Excellent 🞏 Good 🞏 Satisfactory 🞏 Below acceptable standard 🞏 Not known   1. If your rating in (1) or (2) was below satisfactory, please state what needs to be done to improve. 2. Current Stage of Study  |  |  |  |  | | --- | --- | --- | --- | | Stage | Yes | No | Not Applicable | | * 1. Review of Literature |  |  |  | | * 1. Design of Experiments |  |  |  | | * 1. Ethical approval has been obtained |  |  |  | | * 1. Data Collection / Experimental Work |  |  |  | | * 1. Writing up and revising thesis for submission |  |  |  |  1. Is the student working at a rate which will allow her to complete her thesis on time? 🞏 Yes 🞏 No   If not, please explain why and indicate what steps are being taken to address this issue.   1. Do you have any concerns about the student or her work? 🞏 Yes 🞏 No   If yes, please comment.   1. Are there any intellectual property issues which have not been resolved? 🞏 Yes 🞏 No   If yes, please comment. | | | | Filled by Supervisor |
| 1. How often and by what means is contact with your student and the other supervisor maintained?  |  |  |  |  | | --- | --- | --- | --- | |  | Means | Regularly\* | Not Regularly\*\* | | * 1. Student | face-to-face |  |  | |  | phone |  |  | |  | Video conf. |  |  | |  | Skype |  |  | |  | Other – specify |  |  | | * 1. Other Supervisor | face-to-face |  |  | |  | phone |  |  | |  | Video conf. |  |  | |  | Skype |  |  | |  | Other – specify |  |  | | * 1. Student and | face-to-face |  |  | | Other Supervisor | Voice conf. |  |  | | simultaneously | Video conf. |  |  | |  | Other – specify |  |  |   \* write: daily, bi-weekly, weekly, bi-monthly, monthly, etc.  \*\* explain or provide dates   1. Are you satisfied with the frequency and means of contact? 🞏 Yes 🞏 No   If not, please comment. | | | | Filled by Supervisor |
| 1. Research – Briefly describe the work expected to be achieved by the student in the following report period: | | | |
| 1. Any other comments: | | | |
| Name: | Signature: | | Date (dd/mm/yyyy): | | |
| Note: A copy of this report will be emailed to the student, other supervisor and department. | | | | | |