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| **Supervisor Bi-annual Progress Report** |
|  |
| 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 dates1. 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. |