**Annual progress report for Master’s Thesis students**

*The purpose of this report is to ensure that candidates continue to be on track to complete their thesis within the timeframe.*

SECTION A

|  |  |
| --- | --- |
| Candidate’s last name:  |   |
| Student ID number:  |   |
| First name:  |   |
| Scholarship/external funding:  |  □ Yes □ No  |
| Name of Scholarship:  |   |
| Enrolment Date:  |   |
| Degree:  |   |
| Subject:  |   |
| Thesis title:  |   |
| Supervisor’s name:  |   |
| Co-supervisors names:  |   |
|  Date research proposal approved by the Faculty:  |   |
| Ethics application number:  |   |
| Date of ethics approval:  |   |
| Report period:  | From: To:  |

SECTION B

# To be completed by the candidate

|  |  |
| --- | --- |
| 1. Are you aware of any issues or constraints which may delay the completion of your thesis?  | □ Yes □ No (go to question 2) If yes, please specify:    |
| 2. How satisfied are you with your progress? | Please comment:   |
| 3. On average, how many hours per week (including weekends) have you dedicated to your thesis/research?  | Enter number of hours per week:   |

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|  |  |  |  |
| --- | --- | --- | --- |
| 4. Please provide a brief timeline for completing your thesis in a timely manner. |   |  |  |
| 5. Do you have particular concerns that you would welcome more help with (from your supervisors, your school or your home faculty)? | □ Yes If yes, please specify:    |  |  □ No  |
| 6. Please list any additional achievements (e.g. publications, awards, conference presentations or attendances, artistic presentations or performances) since you enrolled for your thesis.  |    |  |  |

Candidate’s signature: Date:

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SECTION C

# To be completed by the supervisor

|  |  |  |
| --- | --- | --- |
| 1. Are you aware of any issues or constraints which may delay the completion of the thesis? |  □ Yes If yes, please specify:  |  □ No (go to question 2)  |
| 2. Please comment on the candidate’s timeline for completion:  |  □ Yes If yes, please specify:  |  □ No  |

Supervisor’s signature: Date:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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SECTION D

# To be completed by the candidate and the supervisor

|  |  |  |
| --- | --- | --- |
| 1. We have read and discussed this report  | □ Yes (go to question 2) If no, please comment:  |  □ No  |
| 2. We have agreed on a strategy for completing this thesis on time  |  □ Yes If no, please comment:   |  □ No  |

SIGNATURES FOR SECTION D

**Candidate’s signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:**

**Supervisor’s signature** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SECTION E

# To be completed by Supervisor

|  |  |  |
| --- | --- | --- |
| Supervisor Opinion and Recommendations  | o  | Confirmed and following the plan  |
|  | o  | Delayed by: ………………………………….. ( Time period)  |
|  | o   | Out of plan  |
| Expected time to finish Thesis   |  |  |
| Supervisor recommendation  | o  | Continue  |
|  | o  | Dismiss  |
|  | o  | Warning  |
|  | o    | Other- Specify   |

**Supervisor’s signature Date Vice Dean for Research and Post Graduate Studies signature:**  **Date**

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