

RESEARCH DEGREE: Interim Monitoring Form

The pre-populated information in this form is sourced from the University's Student Records system. If you believe that any data is incorrect, **do not alter the data yourself but contact your Graduate School Office** and ask them to amend the data in the Student Records system.

PART A: THE CANDIDATE

1. Student ID:
 2. Name in full:
 3. Email Address:
 4. Date of Registration:
 5. Mode of Study:
 6. NTU Programme of Study:
 7. Title of Research Programme:
 8. Registered for:
 9. Latest Possible Submission Date:
 10. Collaborating Establishment(s):
 11. Date RD1PA approved by CRDC
 12. Date RD2T approved by CRDC
- Please tick which stage applies for this form:

Interim Monitoring ☐ RD1PA and Interim Monitoring ☐ RD2T and Interim Monitoring ☐

PART B: APPROVED SUPERVISORY TEAM

Name	Designation
	Director of Study
	2 nd Supervisor
	3 rd Supervisor
	Advisor

PART C: FORMAL MEETINGS WITH SUPERVISORS

What was the approximate frequency of meetings with your full supervisory team? (e.g. Weekly, monthly, by arrangement)

Attach all Supervision Record Forms for all supervision meetings that have taken place since you completed your Interim Monitoring. (This should include all records that were not included with your interim monitoring form)

PART D: RESEARCH STUDENT REPORT

1. For full-time students – how many hours have you devoted over the last academic year to paid teaching or research assistant work per week?

..... hours per week, hours in total

2. Progress made over the last 6 months:

Refer to the content and your view of the quality of your work, as well as to the amount of research

and writing you have done. How would you summarize your progress? If there are any factors that you feel have significantly helped or hindered your progress over the last 6 months, mention them here. Are you still on course to complete within the timeframe outlined in your Project Approval or Transfer document? Please include research training undertaken, publications, conferences, papers exhibitions etc.

3. Plans for the next 6 months:

4. Ethical Issues

- a. Have any new ethical aspects of the project arisen since the last Annual Review? **Y/N***
- b. Has ethical approval been granted by the appropriate College Ethical Review Committee(s)? **Y/N***
- c. If yes, please confirm date of approval ../../.... (DD/MM/YYYY)
- d. If no, please provide details.

Student's Name Student's signature..... Date.....

PART E: DIRECTOR OF STUDIES REPORT

Progress made over the last 6 months:

Please assess progress against the plan of work. Indicate whether the student is on track to complete within 3-4 years full-time or 6-8 years part-time. Please identify any issues or problems which may impede the student's progress. Please also state what you suggest should be done (or what is being done) to address these. Record any actions which have already been taken or are about to be taken. Please comment on the student's plans for the forthcoming 6 months and, in particular, their feasibility. Reasonably accurate in that further revision is required.

Signed by Director of Studies Print Name Date

PART F: RECOMMENDATION OF THE SUPERVISORS AND/OR REVIEW PANEL

Please indicate your joint recommendation by deleting the options below that do not apply.

Please note that Interim Monitoring should not involve a meeting with the Independent Assessor (and not require an Independent Assessor's report or signature) unless the student is combining Interim Monitoring with either Project Approval or Transfer.

If you are combining Interim Monitoring with either Project Approval or Transfer, then you will need to hold a meeting with the full Review Panel including the Independent Assessor. In which case the Independent Assessor will also need to submit a report.

We recommend (*please delete as appropriate):

(1) that the student's progress is satisfactory*

(2) that some matters of concern have become apparent during this monitoring, but these are being managed by the student and supervisory team*

(3) that student's progress is giving sufficient cause for concern, and that the student should be put on probation for a period of three months, and asked to complete an agreed programme of work/action plan during that period*

(4) that further consideration is required because the panel was unable to reach an agreed recommendation*. *(In this case, the supervisory team should attach a separate written report)*

Signed by:

Director of Studies Print Name Date

Co-Supervisor Print Name Date

Co-Supervisor Print Name Date

Co-Supervisor Print Name Date

If the Independent Assessor was involved because you are combining Interim Monitoring with either Project Approval or Transfer, then she or he should sign below:

Independent Assessor's Name Signature Date

PART G: INDEPENDENT ASSESSOR'S REPORT

To be attached to RD1PA/RD2T.

Please note that this Independent Assessor's report is only required if you are combining Interim Monitoring with either Project Approval or Transfer.

For Office Use Only

Reported to CRDC (insert date):

Chair of CRDC's Name Signature Date

NOTES ON ANY CONDITIONS OR SPECIFIC CONDITIONS REQUIRED BY CRDC: