PART 1: To be completed by the student and forwarded through the supervisors

- Postgraduate students are required to consult their supervisors at least once a month and to submit a report every four (4) months.
- A copy of PART 1 is to be sent to the office of the Director, Board of Postgraduate Studies

Student’s Name:.........................................................................................................................

Registration No. ..............................................................................................................................

Email and Phone No..............................................................

Year of Admission:.......................................................School:............................................................

Department:.................................................................................................................................

Title of the Project/Thesis:......................................................
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* This report is the 1st, 2nd, 3rd, 4th, 5th, 6th, 7th, 8th, or 9th (Delete where appropriate) and covers the period between:.................................................................
Summary of work completed (Attach summary of the work done not exceeding three (3) double spaced typed pages of times new roman 12 font size or equivalent)

Proportion of original work plan completed (Please attach the original work plan).

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Constraints/Problems/Advantages/Benefits (if any) and Suggestions

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Work Plan for the next four (4) months (attach the work plan)

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Date: .................................................................................................................................

Signed: .................................................................................................................................
PART II: To be completed by Supervisors and COD(s)

Part A: To be completed by Supervisor(s)

1. 1st Supervisor’s Name: …………………………………………………………………………………

2. In your own opinion, how much work has been done and how much is remaining
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   …………………………………………………………………………………………………………………

Overall assessment: Relevance, Form, grammatical correctness and Content
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Date: …………………………… Signature: ……………………………………………………………

1. 2nd Supervisor’s Name: …………………………………………………………………………………

2. In your own opinion, how much work has been done and how much is remaining
   …………………………………………………………………………………………………………………
   …………………………………………………………………………………………………………………

Overall assessment: Relevance, Form, grammatical correctness and Content
   …………………………………………………………………………………………………………………

Date: …………………………… Signature: ……………………………………………………………

1. 3rd Supervisor’s Name: …………………………………………………………………………………

2. In your own opinion, how much work has been done and how much is remaining
   …………………………………………………………………………………………………………………

Overall assessment: Relevance, Form, grammatical correctness and Content
   …………………………………………………………………………………………………………………

Date: …………………………… Signature: ……………………………………………………………
Part B: To be completed by Chairperson of the Department

Name of the COD/HOD:……………………………………………………………………

1. Comment on the timeliness of the progress of the project and whether the student is Consulting the Supervisors and has presented the required Seminars

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2. Comment on the views of the departmental postgraduate committee on the aspect that has been reported on e.g. data collection, data analysis, literature review, timeliness etc.

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Signed …………………………………………………… Date:…………………………

PART III: Comments by Dean/Director of School/Institute

Name of the Dean/ Director:…………………………………………………………

1. Comment on the views of the school postgraduate committee on the aspect that has been reported on e.g. data collection, data analysis, literature review, timeliness etc.

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Signed …………………………………………………… Date:…………………………
PART IV: Board of postgraduate Studies (BPS)

Comment on the following:

i. Whether the Progress Report is within the Approved Time lines of the student registration.

ii) The completeness of the progress report

Signed:…………………………………………….. Date:………………………………....