UNIVERSITY OF CAPE COAST

DIRECTORATE OF HUMAN RESOURCE
TRAINING AND DEVELOPMENT SECTION

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Cape Coast

SUPERVISORS' PROGRESS REPORT FORM

PROGRESS REPORT ON POSTGRADUATE DIPLOMA, MASTERS AND DOCTORATE DEGREE CANDIDATES
(To be completed by supervisor and submitted through H.O.D to The Training and Development Section)

1. Details of Student

i. Surname (Mr., Miss, Mrs., Dr., Prof., Rev.): .....
ii. Other Names: .....
iii. Name of Institution: ……..
iv. Programme of Study: …….
v. Year of entry: …….
vi. Expected year of completion: ……
vii. Duration of programme: ……

2. STUDENTS' RECORD

i. Thesis topic: ……..
……
ii. Number of years spent: …….
iii. Percentage (%) estimate of progress made (*For entire programme*): ……..
iv. Percentage (%) estimate of progress made for the last year: ……
v. Is student likely to complete within schedule? Yes ☐ No ☐
vi. Has student been referred/failed any course for the year? Yes ☐ No ☐
vii. Has the student encountered any peculiar challenge in the last year? Yes ☐ No ☐
viii. If yes, please give a brief description of the challenge (*Attach an additional sheet if necessary*):……
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3. PROPORTION OF WORK DONE: (Please check at the appropriate places)

CATEGORY	PROPORTION OF WORK COMPLETED			
	Quarter	Half	Three-quarters	Full
Experimental Work/Field Work				
Literature Review				
Analysis of Data				
Write-up				

*Please give your comment on the overall progress of the student and his/her **probable date of completion**.*

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…….. …… ……
(Name of Supervisor) (Signature) (Date)