Lancaster University

For: **Week 5**   **Week10**   **Week 15**

Student ID		Student Name	
Project Title			

Student's Self-Assessment (Summary of progress)

Summary of problems encountered:

 I have met with my supervisor:

    Weekly

    Fortnightly

    Other (please state)   _____

Supervisor's Assessment

 The students' progress to date:

    Is satisfactory   Completed Project Proposal before WK5

    Gives some cause for concern

    Requires a verbal warning

    Requires a formal warning

Comments:

Approval (to be signed by student and supervisor)

 Student: _____   Date: _____

 Supervisor: _____   Date: _____

For office use only

 Verbal warning given: Date:

 Formal warning given: Date:

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