



SOUTHERN LUZON STATE UNIVERSITY

Lucban, Quezon

ORS-2020-001

OFFICE OF RESEARCH SERVICES

PROJECT MONITORING AND EVALUATION FORM

Project Title:

Proponent

Lead Agency

Proposed Date of Project Implementation:

Actual Date of Implementation:

CRITERIA	YES	NO	REMARKS
1. Did the different activities conduct lead to the attainment of objectives?			
2. Were the activities done as scheduled?			
3. Are the data gathered systematically?			
4. Are the data filed systematically? Are the data filed permanently? Are the data easily retrievable?			
5. Is the project implemented in the recommended/ proposed location(s)?			
6. Is the proposed research design followed? • Sampling Design • Number of Replications • Statistical Analysis • Method			
7. Are the equipment/ supplies purchased following the approved work and resource plan and budget?			



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8. Are the project outputs made/ accomplished?			
9. Were there modifications made in any aspect of the project?			
10. What is the percentage of project accomplishment?			
11. Suggestions to solve the problem			

Evaluated by:

Chairperson, PMET

Date