Research Progress Review – Previous and next milestones

Name:

zID:

* Please list your milestones set in the last Research Progress Review and indicate status of the Milestones

|  |  |  |
| --- | --- | --- |
| No | Milestones | Outcome (Achieved or Not Achieved or Not applicable) – Please use a drop-down list below |
| 1 |  | Choose an item. |
| 2 |  | Choose an item. |
| 3 |  | Choose an item. |
|  |  | Choose an item. |
|  |  | Choose an item. |

* New Milestones for next review, agreed in advance with your supervisor and completed in section B4 of GRIS

|  |  |  |
| --- | --- | --- |
| No | Milestones | Due date |
| 1 |  | Select due date |
| 2 |  | Select due date |
| 3 |  | Select due date |
|  |  | Select due date |
|  |  | Select due date |