

# UNIVERSITY OF CAPE COAST SCHOOL OF GRADUATE STUDIES

## MPHIL/MCOM/PHD STUDENT SEMESTER REPORT FORM

1<sup>ST</sup> [ ] 2<sup>ND</sup> [ ] SEMESTER, 20......

#### **INSTRUCTIONS:** (Please read carefully)

- 1. Students are to print the form, complete Part A and sign it.
- 2. Students are to send the signed form and appended signature sheet to their supervisors.
- 3. Supervisors are to complete Part B and sign (Student should ensure all supervisors sign).
- 4. Students are to send a signed copy of the completed report to the Head of Department/ Institute/Centre and retain a copy.
- 5. Students are to send the original report to the School of Graduate Studies (SGS) within one month after the end of each semester. (i.e. before 1<sup>st</sup> February for First Semester and 1<sup>st</sup> September for Second Semester)
- 6. STUDENT'S REPORT OF LAST SEMESTER WORK. Students are to: a) List the objectives that were set for the semester under review and b) evaluate the progress made overall, and whether the objectives set were attained; if not, why; and any other significant achievements not signalled in the last report.
  - For postgraduate research students in their first (probationary) year of study, the "Academic Performance Standards" or the conditions stated for up-grading of postgraduate research students should be used here rather than the last semester's objectives. Academic advisors will provide the progress report on such students.
- 7. STUDENT'S STATEMENT OF OBJECTIVES FOR NEXT SEMESTER. List objectives set for the next semester. Postgraduate research student entering the first semester of his/her second year should set objectives relating to his/her research.

#### PART A: TO BE COMPLETED BY STUDENT

Student's Name				
Student's Name: Surname			Other Names	
Programme: MPhil [	]/ M.Com [	]/PhD [ ] in		
Contact Address:	E-mail:			Tel:
Department/Acade	mic Unit:		•••••	
Registration Number:		Re	Reg. Status:[F: Full-time, P: Part-time]	
Registration Date:			Completion Date:	
Title of Thesis/Diss	sertation (if	applicable <b>):</b>	•	

## 1. STATE THE OBJECTIVES SET FOR THE LAST SEMESTER

# 2. EVALUATE YOUR PROGRESS IN THE LAST SEMESTER

- a) Overall: Very Good [ ]; Good [ ]; Satisfactory [ ]; Poor [ ]; Very Poor [ ]
- b) Provide details:

4. E	ΓHICAL APPROVAL/MAJOR CHANGES.
(a)	Does the current phase of the project involve human/animal/genetic research/experimentation? YES [ ] / NO [ ]
	If "Yes", has approval by the appropriate (i.e. Faculty/School/Professional body) Ethics Committee been obtained? YES [ ] / NO [ ]
(b)	Is there a significant change of topic or the way the research is taking place from what was previously proposed? YES [ ] / NO [ ]
	If "Yes", what are the changes?
	RE THERE ANY MAJOR CHALLENGES TO YOUR WORK? YES [ ]; NO [ ]
If '	"YES", what are they and how are they being resolved?

3. PROVIDE YOUR OBJECTIVES FOR THE NEXT SEMESTER

# PART B: TO BE COMPLETED BYADVISOR'S SUPERVISORS

ACa)	ADEMIC ADVISOR'S /PRINCIPAL SUPERVISOR'S ASSESSMENT OF PROGRESS.  THE STAGE OF THE COURSE WORK/RESEARCH:
b)	PROGRESS OF COURSE WORK/RESEARCH FOR THE LAST SEMESTER
	Very Good [ ]; Good [ ]; Satisfactory [ ]; Poor [ ]; Very Poor [ ]
c)	NUMBER OF MEETINGS BETWEEN SUPERVISORS AND STUDENT (PLEASE PROVIDE DATES)
d)	ARE THERE ANY MAJOR CHALLENGES TO THE WORK? Yes [ ]; No [ ] If "yes", what are they and how are they being resolved?
d)	COMMENT ON STUDENT'S OBJECTIVES FOR THE NEXT SEMESTER

Name  Signature/s  ACADEMIC ADVISER/ PRIN. SUPERVISOR:  Name  Signature/s  CO-SUPERVISOR:  Name  Signature/s  Signature/s  OFFICIAL USE ONLY  CGPA of Candidate (if applicable): Signature of Progress  The report meets the SGS requirements.:  YES [ ] NO [  f "NO", state the problem and refer it to the Vice-Dean, SGS			
ACADEMIC ADVISER/ PRIN. SUPERVISOR:  Name  Signature/  CO-SUPERVISOR:  Name  Signature/  Signature/  Signature/  Signature/  The report meets the SGS requirements.:  YES[] NO[  #NO", state the problem and refer it to the Vice-Dean, SGS	Name		G: /D /
Name  Signature/I  CO-SUPERVISOR:  Name  Signature/I  OFFICIAL USE ONLY  CGPA of Candidate (if applicable):  Status of Progress  The report meets the SGS requirements.:  YES[] NO[  f "NO", state the problem and refer it to the Vice-Dean, SGS  Name of Officer:  Signature and			Signature/Date
CO-SUPERVISOR:  Name  Signature/I  OFFICIAL USE ONLY  CGPA of Candidate (if applicable):  Status of Progress  The report meets the SGS requirements.:  YES [ ] NO [ ]  If "NO", state the problem and refer it to the Vice-Dean, SGS			
Name  Signature/I  OFFICIAL USE ONLY  CGPA of Candidate (if applicable):  Status of Progress  The report meets the SGS requirements.:  YES [ ] NO [  If "NO", state the problem and refer it to the Vice-Dean, SGS  Name of Officer:  Signature and	Name		Signature/Date
OFFICIAL USE ONLY  CGPA of Candidate (if applicable):  Status of Progress  The report meets the SGS requirements.:  YES [ ] NO [ ]  If "NO", state the problem and refer it to the Vice-Dean, SGS  Name of Officer:  Signature and	O-SUPERVISOR:		
CGPA of Candidate (if applicable):  Status of Progress  The report meets the SGS requirements.:  YES [ ] NO [ ]  If "NO", state the problem and refer it to the Vice-Dean, SGS  Name of Officer:  Signature and	Nam	е	Signature/Date
If "NO", state the problem and refer it to the Vice-Dean, SGS  Name of Officer:  Signature and	FFICIAL USE ONLY		
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If "NO", state the problem and refer it to the Vice-Dean, SGS  Name of Officer:  Signature and	tatus of Progress		
Name of Officer:  ———————————————————————————————————	he report meets the SGS requiremen	ts.:	YES [ ] NO [ ]
	"NO", state the problem and refer i	t to the Vice-Dean, SGS	
	ame of Officer:		
			Signature and Date
Remarks by Vice-Dean, SGS	emarks by Vice-Dean, SGS		

ignature and Date

7. DECLARATION: