



## Annual Progress Report (for postdoctoral award holders)

Award holder family name		Award holder given name		Initials
Full name of institution				
Department/Division name			Award number	
Primary telephone number Country code    Area code    Number    Extension		Secondary telephone number Country code    Area code    Number    Extension		
Primary email		Fax		
<b>Award Holder's Report</b>				
Award holders must attach a one-page report of the work accomplished. You must take account of the following elements:				
<ol style="list-style-type: none"> <li>1. What progress was made in the program of research during the previous year? Did this progress meet or surpass the objectives set at the beginning of the year? Explain.</li> <li>2. What progress was achieved during the previous year with respect to professional development? Provide details on any publications and/or papers presented before learned societies, the development of personal research networks, and teaching experience.</li> <li>3. Provide a short outline of the infrastructure that was provided by your institution of affiliation (e.g., office space, library privileges, course to be taught, etc.).</li> <li>4. If you are teaching one course, provide information on the subject taught, the level of study (graduate or undergraduate), and number of students.</li> <li>5. Comment on the degree to which the department has involved you in its activities (e.g., the mentoring of students, any administrative duties, or other activities)</li> </ol>				
<b>Comments of Supervisor</b>				
1. How often do you meet with the award holder? <input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> every two months <input type="checkbox"/> rarely or never				
2. What infrastructure has the department provided? _____				
3. What is your general assessment of the award holder's progress during the past year? Elaborate: <input type="checkbox"/> excellent <input type="checkbox"/> very good <input type="checkbox"/> good <input type="checkbox"/> inadequate (attach any relevant documents)				
Name of supervisor (print)		Signature		
Institution			Date	
<b>Comments of the Head of Department or designated person</b>				
Describe briefly the degree of involvement of the award holder in departmental activities:				
<input type="checkbox"/> fully satisfactory report <input type="checkbox"/> unsatisfactory report (indicate what measures have been or will be taken to redress the situation)				
Name of head of department/designated person (print)		Signature		
Institution			Date	

Personal information will be stored in the personal information bank for the appropriate program.