



ACADEMIC DEVELOPMENT GRANTS

PROJECT PROGRESS REPORT EVALUATION FORM

Project Information:

- Project Title: _____
- Project Number: _____
- Principal Investigator: _____
- Department: _____
- Progress Report Due Date: _____ Date Received: _____

Project Progress:

Kindly review the progress report of the project and ensure that it conforms to the requirements as approved, i.e., does it answer the following questions:

1. Project tasks accomplished during the project period vs. the project work plan:

☐ Satisfied ☐ Partially satisfied ☐ Not satisfied

- Explain: _____

2. The contribution of each of the investigators vs. the assigned tasks:

☐ Satisfied ☐ Not satisfied

- Explain: _____

3. Conformity with the proposed objectives of the project:

☐ Satisfied ☐ Partially satisfied ☐ Not satisfied

- Explain: _____



4. Conformity with the proposed time schedule of the project:

☐ *Satisfied* ☐ *Partially satisfied* ☐ *Not satisfied*

- Explain: _____

5. The overall progress of the project:

☐ *Satisfactory* ☐ *Partially satisfactory* ☐ *Not satisfactory*

- Explain: _____

6. Any problems encountered and the recommended action:

☐ *No* ☐ *Yes*

- Recommended Action: _____

7. Additional comments (if any):

Comments:

Reviewer's Name _____ Signature _____