



SCHOOL OF GRADUATE STUDIES
UNIVERSITI TEKNOLOGI MALAYSIA
MSc/PhD Supervision Record

Student Name	Supervisor Name	Date of previous meeting:
Type of meeting (circle as appropriate) Scheduled/Unscheduled/End of year review		Date of today's meeting:

Please outline the current objectives and progress made in achieving them.

Please answer the following questions:

	Supervisor		Student	
	Yes	No	Yes	No
Has the student made sufficient progress in meeting the objectives?				
Are the supervisor and student clear about current objectives?				
Have any specific problems associated with the work or supervision been identified? If appropriate, please comment below.				
Are the supervisor and student clear about the work to be done before the next meeting?				

Report of supervisory session - please note any additional comments here.

Please outline current/new objectives agreed for period from today to next meeting.

Date of next meeting:

Signature (student):

Signature (supervisor):

Copies to be retained by students and supervisor. Copies will be required as part of semester report on student progress.
supervisory_report_form.doc