Progress Report

Grant ID: …………………………………………

LPI Name: ……………………………………………….

**Report Peroid from**: dd/mm/yyyy till dd/mm/yyyy

**Collaborator Name**: ………………………………………….

1. **Project Information:**

|  |  |
| --- | --- |
| Project ID |  |
| Project Full Duration |  |
| Current year (1st, 2nd or 3rd) |  |
| QU LPI Name |  |
| Collaborator LPI Name |  |
| QU Awarded Amount (QR) | Y1: | Y2: | Total: |
| Collaborator Awarded Amount (QR) | Y1: | Y2: | Total: |

1. **Scope, Purpose and Progress:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Specific Aim / Stages | Not Started | In Progress | CompletedIn “date” | Comments |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |

1. **Results Achieved:**
2. **Remaining Research Questions:**
3. **Grant outputs and progress against grant proposal commitments**

Kindly summarize in the table below the grant outcomes committed to in the proposal and indicate the progress made. Under the table add a list for publications and capacity building.

* Add publication(s) “if any”, including those in preparation (indicate journal impact factor and Clarivate Analytics quartile ranking Q1, Q2..etc). Please add all citation details.
* **For capacity building:**
	+ Add names of RAs recruited (dates of recruitment) and their job numbers.
	+ Add names of students involved and their QUID numbers

|  |  |  |  |
| --- | --- | --- | --- |
| **No** | **Committed Outcomes in the Grant Proposal** | **Number of Committed Outcomes** | **Number of Achieved Outcomes** |
| 1 | Supervised or co-supervised students on a thesis/project within this proposal |  |  |
| 2 | Expected number of journal articles published in journals listed in **Web of Science Clarivate (Quartile in Category Q1)** |  |  |
| 3 | Expected number of journal articles published in journals listed in **Web of Science Clarivate (Quartile in Category Q2)** |  |  |
| 4 | Expected books  |  |  |
| 5 | Expected chapters  |  |  |
| 6 | Expected patents to be filed (if any) |  |  |
| 7 | Technology transfer with industry (indicate Yes or No) |  |  |
| 8 | Creative works (please specify): ----------------------------------------------------------- |  |  |
| 9 | Others (please specify): --------------------------------------------------------------------- |  |  |

1. **Action plan for the next six months:**

|  |  |
| --- | --- |
| List of Aims | Action Plan |
| Aim (1): …….. |  |
| Aim (2): ……. |  |
| Aim (3): ...…. |  |

1. **Potential difficulties “if any”:**
2. **Contribution of Collaborator Budget:**

Associate Dean for Research & Graduate Studies Recommendation:

…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

Name: ……………………………………………. Signature: ………………………. Date: ……………………..