

NTNU, Faculty of Medicine and Health Sciences

ePhorte:

Date:

MID-TERM EVALUATION

Name PhD candidate	PhD Programme	Department	
Date of admission	Start of employment	Full time/ Part time	
Planned submission	End of employment	Leave of absence – (from/to)	
Main supervisor/Department	Co-supervisor /Department	Co-supervisor/Department	
Working title of the thesis			
Project – progress plan	OK <input type="checkbox"/>	To be re-evaluated <input type="checkbox"/>	Remarks
Planned publications	OK <input type="checkbox"/>	To be re-evaluated <input type="checkbox"/>	Remarks
Published papers	OK <input type="checkbox"/>	To be confirmed <input type="checkbox"/>	Remarks
Status of the organized academic training (courses)	OK <input type="checkbox"/>	To be re-evaluated <input type="checkbox"/>	Remarks
Updated time schedule/ progress plan	OK <input type="checkbox"/>	To be re-evaluated <input type="checkbox"/>	Remarks
This meeting with PhD candidate and supervisor(s) took place:	Date:	Attendees:	

Summary from the mid-term evaluation meeting

Other comments

Final conclusion

Recommended actions

Trondheim _____ Sign _____

Sign _____