



Annual Progress Report (for postdoctoral award holders) — Form 3B

Photocopy this form as needed for the duration of your award.				
Award holder family name		Award holder given name		Initials
Full name of university				
Department/Division name			Award number	
Primary telephone number		Secondary telephone number		
Country code	Area code	Number	Extension	Country code
				Area code
				Number
				Extension
Primary E-mail			Fax	
Award Holder's Report				
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"> 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. 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. 3. Provide a short outline of the infrastructure that was provided by your university of affiliation (e.g., office space, library privileges, course to be taught, etc.). 4. If you are teaching one course, provide information on the subject taught, the level of study (graduate or undergraduate), and number of students. 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) 				
Comments of Supervisor				
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	
University			Date	
Comments of the Head of Department or designated person				
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	
University			Date	