## 

***Sveučilište u Rijeci • University of Rijeka***

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## RESEARCH LOG NR. \_\_\_ / 2019

## 

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| NAME OF DOCTORAL STUDY |
|  |

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| 1. **BASIC INFORMATION** | |
| *1.1. Mentor(s)* | |
| *Title, name and surname* | *Institution, country* |
|  |  |
|  |  |
| *1.2. Co-mentor* | |
| *Title, name and surname* | *Institution, country* |
|  |  |
| *1.3. Title, name and surname of the doctoral student* | |
|  | |
| *1.4. Registration number of the doctoral student* | |
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| *1.5. The period for which the report is being submitted (date of last supervision to date)* | |
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| 1. **STUDENT** *– prior to the meeting* | |
| * 1. *Is the work plan created?*   *(please tick the appropriate box)* | **yes**  **no** |
| * 1. *If the answer to the previous question is „no“, please explain why.* | |
|  | |
| * 1. *Work submitted to supervisor since last supervision meeting (with date work submitted and returned to you).* | |
|  | |
| * 1. *Work undertaken since last supervision meeting:* | |
|  | |
| * 1. *Please indicate the difficulties that affect or may affect the course of your study* | |
|  | |
| *2.6. Issues you would like to discuss in the supervision meeting:* | |
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| MENTOR *– after the meeting* |
| *3.1. Topics covered in supervision meeting (refer to work undertaken since last supervision meeting)* |
|  |
| *3.2. Comments on student's progress since last supervision meeting.* |
|  |
| *3.3. Comments on student's performance in taught elements of the programe (courses taken, publishing, training)* |
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| *3.4. Do you foresee any significant changes to the research proposal or the use of new research techniques? If yes, please, explain.* |
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| OPINION ON THE CANDIDATE'S ABILITY TO CONTINUE THE RESEARCH | |
| * 1. *Overall rating of students' progress to date (thick one)* | very satisfactory  satisfactory  giving cause for concern |
| * 1. *If „Giving cause for concern“ please state clearly the steps the student should take to reach a level of satisfactory progress.* | |
|  | |
| *4.3. What should the student undertake between now and next supervision?* | |
|  | |
| 4.4. Work to be submitted to mentor before next supervision (with dates): | |
|  | |

|  |  |
| --- | --- |
| Place, date and signatures | |
| Date and time of the next meeting |  |
| *“This form contains a good summary of our meeting”* | |
| *Opatija,* *Signature*  *(name and surname of the mentor)*  *Signature*  *(name and surname of the co-mentor)*  *Signature*  *(name and surname of the student)*  *A copy of this form should be kept by the supervisor and by the student.* | |