**EVALUATION OF RESEARCH PLAN**

***(to be completed the second/third/fourth year)***

**Doctoral program in [indicate program]**

#### **Doctoral student’s personal data**

|  |  |
| --- | --- |
| **surname(s)** | **name** |
|  |  |
| **id/nie number** | **passport** | **email** |
|  |  |  |
| **researcher id** | **orcid code** |
|  |  |

#### **Doctoral student’s academic data**

|  |
| --- |
| **supervisor(s)** |
|  |
| **tutor *(only include if not the supervisor)*** |
|  |
| **academic course** |
| 20\_\_/20\_\_ |

#### **Report by (check where applicable)[[1]](#footnote-1):**

* Tutor
* Supervisor
* Academic Committee

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Evaluation of research plan 2** | A | B | C | D |
| The degree of accomplishment of the proposed objectives allows me to guarantee that the doctoral thesis can be submitted on the scheduled date.  |  |  |  |  |
| The review of objectives is justified and the viability of their acquisition is guaranteed. |  |  |  |  |
| The updating of the work plan is appropriate |  |  |  |  |
| The candidate has sufficient material means and resources. |  |  |  |  |

#### **Global evaluation**

* Positive
* Negative

|  |
| --- |
| **JUSTIFIED REPORT FOR THE EVALUATION PROVIDED**: (Annexes can be added as necessary)  |

In ................., the ... of ..................... , 20..

Signed:

[Depending on the case, indicate the name and surname of the Tutor/Supervisor/President of the Academic Committee of the Program]

**Once complete, please send this form to:**

**Universidad Internacional Menéndez Pelayo**

**Secretaría de Estudiantes de Posgrado**

**Isaac Peral, 23 28040 Madrid**

**Tel: + 34 91 592 06 00 / 06 33**

**E-mail:** **alumnos.posgrado@uimp.es**

**VICERECTOR OF POSTGRADUATE AND RESEARCH**

1. In the case that the Supervisor is different than the Tutor or when there are several Supervisors, each should issue a separate report.

2 A: Excellent / B: Remarkable / C: Sufficient / D: Insufficient [↑](#footnote-ref-1)