**3rd Progression Review – Supervisor Report**

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| Student name: |  |
| Student ID number: |  |
| Programme name: |  |
| Academic Unit: |  |
| Supervisor/s: |  |

*This form would normally be completed by the main supervisor. However, in the case where there is a co-ordinating supervisor in addition to the main supervisor, it should be completed by the co-ordinating supervisor. The co-ordinating supervisor must be a University of Southampton staff member.*

Your student has now submitted their 3rd Progression Review Report, review of Academic Needs Analysis, and updated training record for assessment.

The Progression Review Report, training record and review of Academic Needs Analysis should be viewed by all members of the supervisory team and **a review meeting with the student and the supervisory team should then take place.** This should usually involve all members of the supervisory team **but at least two members should be present**.

The review meeting should include, as a minimum, a review of the thesis structure and plans for submission, as well as discussion of plans for transfer to nominal registration. Following the review meeting, a recommendation has to be made by the supervisory team as to whether the student can progress to the final stage of their candidature or if they should be reassessed.

Once the review meeting has taken place, you should complete the report below after consulting the rest of the supervisory team.

**Please ensure you complete this form and return it to the Graduate School Office promptly as the student will not receive the review meeting recommendation and report until this form is submitted.**

If the recommendation is to reassess the student, **the Director of the Faculty Graduate School and the student must be informed of the outcome within ten working days of the review meeting**, in accordance with the ‘Procedures for Circumstances that may lead to Withdrawal or Termination’. (<http://www.southampton.ac.uk/quality/pgr/research_degree_candidature/termination_withdrawal.page>)

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Following the review meeting, please complete the form below. Please circle/delete as appropriate. **Questions marked with an asterisk are mandatory.**

**If the recommendation is NOT to progress the student, please advise on further action required.**

**\*** Has the student fulfilled all required training and completed the quarterly activity reports?YES/NO

If NO, please give details:

\* Date of Review Meeting:

\* Recommendation**:** Pass/Reassess

**Is there a clear plan for submission?**

Please comment on any areas where you feel improvement is required in order to successfully complete the Doctoral thesis.

**Issues for consideration**

Please list any issues which came to light during the review meeting and describe what action should be undertaken to overcome them.

**Supervisor Report**

The supervisor report should include your comments on the 3rd Progression Review Report and review meeting, as well as recommendations for further work or training to be undertaken. You should also comment on what further work is required before the student is in a position to transfer to nominal registration.

**If the recommendation is to reassess the student, this would normally require a resubmission of the 3rd Progression Review Report as well as a formal review. The formal review will be conducted by a panel consisting of a member of the supervisory team, an independent assessor and an independent chair.**

If amendments to the Progression Review Report are necessary, please indicate this clearly in your report.

Please type your report in the box below or submit a separate document with this form.

**Action Plan** (if applicable)

If the Review Meeting recommendation was to reassess the student, please consult with the rest of the supervisory team and the student and submit an action plan for the student with this form. The action plan should address any required revisions or further work.

**Resubmission deadline:**

The resubmission deadline should be at the latest 1 month before the final 3rd Progression Review deadline. The final 3rd Progression Review deadline is noted in the email that was sent to you with this form.

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| --- | --- |
| Supervisor’s Name: |  |
| Signature: |  |
| Date: |  |

**When you have completed this form, please sign it and return to the Graduate School Office.**

**Student Review**

**Instructions**

Please review the supervisor report and the action plan (if applicable).

Once you have reviewed these, please complete this form and forward to the Faculty Graduate School Office. If you wish to add any comments you can do so in the box below.

**Please Note: you are required to tick the statement below and submit this form in order to continue your registration on your programme of study.**

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**Please tick to confirm you acknowledge the comments and recommendation and agree to undertake further training and actions as indicated in the report and action plan (if applicable) □**

Any comments you wish to make:

|  |  |
| --- | --- |
| Student’s Name: |  |
| Signature: |  |
| Date: |  |

**When you have completed this form, please sign it and return to the Graduate School Office.**

**Directorate Approval**

**Please approve this progression review**

Please review this progression review and action plan (if applicable) then sign this form and return to the Graduate School Office.

If the recommendation is to reassess the student, please follow the procedures as outlined in the ‘Procedures for Circumstances that may lead to Withdrawal or Termination’ in advance of the re-viva.

(<http://www.southampton.ac.uk/quality/pgr/research_degree_candidature/termination_withdrawal.page>).

If there are any issues with the progression review or action plan (if applicable), please contact the supervisor directly. If it is necessary to make amendments to the supervisor’s report or action plan these must be submitted directly to the Graduate School Office.

|  |  |
| --- | --- |
| Name: |  |
| Signature: |  |
| Date: |  |

**When you have completed this form, please sign it and return to the Graduate School Office.**