AGA KHAN UNIVERSITY

# PROGRESS REPORT

# RESEARCH PROJECTS

**PROJECT ID REPORT DATE**

GRANT CODE **FROM** AND **TO**

**URC** **Seed Money** **Externally Funded**: Local Overseas

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| **PROJECT TITLE** : |  |
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| **PRINCIPAL INVESTIGATOR** |  |
| OR REPORTED BY |  |

[[1]](#footnote-1)**PLEASE COMPLETE AND RETURN THIS FORM NO LATER THAN:**

|  |  |
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| 1. PROJECT COMMENCEMENT DATE: |  |

1. IF THE PROJECT HAS NOT COMMENCED, OR COMMENCEMENT IS DELAYED, ADVISE WHEN THE PROJECT IS EXPECTED TO COMMENCE OR WHETHER THE PROJECT IS TO BE WITHDRAWN OR WHAT IS THE REASON FOR DELAY IN STARTING THE PROJECT WORK

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1. IS THE PROJECT COMPLETE ?YES IF YES, GIVE A DATE :

NO

1. GIVE A BRIEF REPORT OF PROGRESS AND RESULTS TO DATE, IF ANY, AND INCLUDE A LIST OF PUBLICATIONS, IF ANY (ATTACH A SEPARATE PAGE IF NECESSARY).

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| 1. THIS REPORT COVERS THE PERIOD BETWEEN |  | TO |  |

1. DETAILS OF PROGRESS REPORTS (IF ANY) SUBMITTED EARLIER.

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| **REPORT NO** | **PERIOD COVERED** | **PHASE WISE**  **COMPLETION OF THE WORK PLAN** | **DATE OF SUBMISSION** | **REMARKS** |
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1. HAS THE PROJECT BEEN CONDUCTED IN ACCORDANCE WITH THE PROTOCOL APPROVED BY THE GRC AND THE ERC?

Yes No

IF NO, PLEASE GIVE DETAILS.

1. HAVE YOU MADE ANY MAJOR MODIFICATION IN THE ORIGINAL PROTOCOL OR METHODOLOGY, OR WORK PLAN?

Yes No

IF YES, PLEASE GIVE DETAIL OF REASONS FOR MODIFICATIONS. (ATTACH A SEPARATE SHEET)

1. HAS THE ERC/REC APPROVAL PERIOD EXPIRED?

Yes No

IF YES, DO YOU WISH TO APPLY FOR AN EXTENSION OF THE APPROVAL PERIOD?

Yes No

IF YES, PLEASE STATE THE NEW EXPIRY DATE REQUESTED AND THE REASON FOR REQUEST FOR EXTENSION.

PLEASE REMEMBER THAT ANY AMENDMENTS TO THE APPROVED PROTOCOL REQUIRE FURTHER SPECIFIC APPROVAL BY GRC AND ERC/REC.

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I CONFIRM THAT THIS RESEARCH PROJECT IS IN CONFORMITY WITH THE SPONSOR[[2]](#footnote-2) AND THE APPROVAL OF THE ETHICS REVIEW COMMITTEE ( SUBJECT TO ANY CHANGES SUBSEQUENTLY APPROVED) AND THAT ALL MAJOR AMENDMENTS ARE ALREADY REPORTED TO THE RESEARCH OFFICE.

ALL FINANCIAL MATTERS ARE DEALT ACCORDING TO THE GRANTS & CONTRACTS OFFICE GUIDELINES.

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| **Principal Investigator** |  |  |  |

###### Name Department

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###### Signature Date

**Department Chair**

**(Signature & Date) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. Submit Progress Report to Research Office, Juma Building [↑](#footnote-ref-1)
2. Sponsor is referred to as the funding agency for e.g. URC, Seed Money or External funding agency. [↑](#footnote-ref-2)