Report of the annual TAC meeting

Annex to the annual progress report

|  |
| --- |
| Meeting  |
| Date:       |
| Number of the TAC meeting:        |

|  |
| --- |
| Doctoral candidate |
| First name:       Last name:       |
| Student ID number:       Date of birth: (DD/MM/YYYY)       |

|  |
| --- |
| Supervisor/s |
| First name:       Last name:       |
| Department:        |
| First name:       Last name:       |
| Department:        |
| First name:       Last name:       |
| Department:        |

|  |
| --- |
| Postdoctoral member/s (ViDSS Supervisory Team) |
| First name:       Last name:       |
| Department:        |
| First name:       Last name:       |
| Department:        |

|  |
| --- |
| Mentors (TAC) |
| First name:       Last name:       |
| Department:        |
| First name:       Last name:       |
| Department:        |
| First name:       Last name:       |
| Department:        |

|  |
| --- |
| Brief summary of the meeting |
|       |

|  |
| --- |
| Recommendations of the mentors concerning the project |
|       |

|  |
| --- |
| Recommendations of the mentors to the candidate and the supervisor/s |
|       |

|  |
| --- |
| Recommendations of the mentors concerning career development of the doctoral candidate |
|       |

|  |
| --- |
| Dates and signatures |
| With my signature, I confirm that I have attended the meeting at the aforementioned date and agree to the assessment above. |
| Doctoral candidateDate, place       Signature |
| Supervisor/sDate, place       SignatureDate, place       SignatureDate, place       Signature |
| Postdoctoral member/s (ViDSS Supervisory Team)Date, place       SignatureDate, place       Signature |
| MentorsDate, place       SignatureDate, place       SignatureDate, place       Signature |