

## **Progress Report**



Progress Report No ( )	
Student Name :	Student ID :
Major:	Date :
Brief description of the activities, assignments, projection	ects, and training where student was
involved in:	
Supervisor Name:	Signature:
position:	Date:
Company/Organization:	Phone:
	Fax:
Stamp Important Instru	Email:
1. This form is to be filled in English by the student and approved by his supervisor at work.  2. This form is to be filled for three periods: after 2, 5, and 7 weeks  3. The original approved three progress reports must be attached to the final report to be submitted to the department.  4. In case you need to type or extend this form, the supervisor should sign any additional pages.	