

Research Project Annual Report

(Submit by June 15 of every year)

Changed a mentor or topic? Submit a new *Research Project Description and Approval Form*.

Year: 1 2 3 x 4

Name of Resident:

Name of Supervisor:

Division:

Project Start Date:

Project Completed:

YES

NO

Project Title:

Signature Resident:

Signature Supervisor:

Signature Director of Research:

Signature Residency Program Director:

Meeting With Mentor (expected at least every 3 months):

1. Date:

Outcomes (success, challenges and opportunities with the project):

Resident Signature

Supervisor Signature

2. Date:

Outcome:

Resident Signature

Supervisor Signature

3. Date:

Outcome:

Resident Signature

Supervisor Signature

4. Date:

Outcome:

Resident Signature

Supervisor Signature

Timeline: (fill as you progress with your study)

Start Date

Expected Submission to local Ethics Board

Completion of data collection

Completion of data analysis

Completion of write-up

Submission to DOP Research Day

Date of presentation at DOP Research Day

Presentation at a conference

Name:

Presentation at a conference

Name:

Presentation at a conference

Name:

Paper submission to journal 1

Paper submission to journal 2

Paper submission to journal 3

Paper accepted for publication :

Paper published :

Journal Name:

Award : Name –

Date

Award : Name –

Date

Grant Received

Source:

Amount: