**College of Radiographers Doctoral Fellowship Grant**

**Interim report form**

Please use the tab key to move to next question

|  |  |
| --- | --- |
| **1. Principal Investigator** |  |
| **2. Project Title** |  |
| **3. Amount of Grant** |  |
| **4. Spending – Is the money being used as indicated in your proposal (if not why)?** | |
|  | |
| **5. Amendments – Please provide details of any agreed amendments to your original application** | |
|  | |
| **6. Summary of objectives** | |
|  | |
| **7. Summary of work and findings to date** | |
|  | |
| **8. Summary of work ongoing** | |
|  | |
| **9. Summary of future plans – please include an estimate timeline for work progression** | |
|  | |
| **10. Have you presented the work at a national/international event (if so where)?** | |
|  | |
| **11. Have you submitted any findings for publication (if so please provide publication details)?** | |
|  | |

**9. Return of interim report form**

Please return this form to:

Professional and Education Administration Team

The Society & College of Radiographers

207 Providence Square

Mill Street

London

SE1 2EW

Or by email at [pande@sor.org](mailto:pande@sor.org)