PART II PROJECT: SUPERVISOR’S FORM

To be completed electronically by all Part II Supervisors and returned to
the Academic Administrative Assistant by Monday 5th September.

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| **Student Name:** |       |
| **Supervisor:** |       |
| **Name and brief description of Part II Project:** |       |

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| **Section A - Equipment** |
| **A1** | Please state the equipment / software which this project will use |       |
| **A2** | Is it all in working order? | [ ]  Yes If yes, go to [Section B](#Materials)[ ]  No  |
|  |  | What measures have been taken to ensure that it is working by 12th September? |       |
|  |  | If it is not working by 12th September, what will happen to this project? |       |
| **Section B - Materials** |
| **B1** | State any raw materials, samples or software that the student should be provided with. |       |
|  |  | Are these currently available and reserved for the student? | [ ]  Yes If yes, go to [Section C](#Training)[ ]  No  |
|  |  | What measures have you taken to ensure that they will be available by the time they are needed? |       |
| **Section C - Training** |
| **C1** | What training will the student need and how and when will it be provided |       |
| **C2** | Will the student require access to EM instrumentation? | [ ]  Yes If yes, go to [Section D](#FurtherEM)[ ]  No If no, go to [Section E](#GenComments) |
| **Section D – Electron Microscopy** |
| **D1** | Briefly describe the project in relation to EM. What data is required from EM, from what materials? Which techniques might be used? |       |
| **D2** | Does EM play a heavy role in the project? | [ ]  Yes [ ]  No  |
|  |  | Will the student be expected to be a trained user? | [ ]  Yes [ ]  No  |
|  |  | Does expertise exist within your group for the desired techniques? \*\* It would be helpful if any supervisors who have the capability within their own research groups, and are willing to support some of their PtII training, let us know about this so that appropriate training plans can be put in place. | [ ]  Yes Comments:      [ ]  No If no, go to [D3](#EMSupport) |
|  |  | Is there someone in the group willing to train the student? | [ ]  Yes If yes, give details:      [ ]  No If no, go to [D3](#EMSupport) |
| **D3** | Does expertise exist within your group to support the PtII student in EM?\*\*Part IIs using EM should primarily be supported and/or trained within the hose research group. | [ ]  Yes [ ]  No |
| **D4** | Please describe details of support you wish to request from the EM Facility research support staff – for example service work, which may be more efficient than user training in instances where EM forms a minor component of the project. If you are requesting support please discuss with EM Facility staff in advance of completing this form.  |       |
| **D5** | Does the student have previous experience of EM? (e.g. the Characterisation module or any work placements) | [ ]  Yes If yes, give details:      [ ]  No  |
|  | Please discuss your requirements directly with EM research support staff, before completing the form, should you have any questions. |
| **Section E - Comments** |
| **E1** | Any other comments (e.g. confidentiality of work proposed): |       |

Thank you