Performance Record

**This performance record must be attached to the annual progress, completed and signed by the PhD Student, supervisor and Co-supervisor report, and sent back to juniorFLAIR.** **(**[**juniorflair@mfm.tu-darmstadt.de**](mailto:juniorflair@mfm.tu-darmstadt.de)**)**

|  |  |
| --- | --- |
| PhD Student |  |
| Supervisor |  |
| Co-Supervisor (FLAIR) |  |
| Provisional thesis title |  |

Part A Compulsory Qualification Program

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| ***I. CRC specific courses/lab- courses***  3 out of the list | | | |
|  | Course name | Semester |  |
| **1** |  |  | Please enclose certificate of the course |
| **2** |  |  | Please enclose certificate of the course |
| **3** |  |  | Please enclose certificate of the course |
| **4** |  |  | Please enclose certificate of the course |
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| --- | --- | --- | --- |
| ***II Soft Skills/Scientific Writing***  1 course of choice per year, 3 in total  Topic: | | | |
| **1** |  |  | Please enclose certificate of the course |
| **2** |  |  | Please enclose certificate of the course |
| **3** |  |  | Please enclose certificate of the course |
| **4** |  |  | Please enclose certificate of the course |

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| ***III. Scientific independence, communication*** |

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| ***CRC Colloquium*** (Participation in 10 colloquiums is required for one doctoral program)  Topic Date | | | |
| **1** |  |  |  |
| **2** |  |  |  |
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|  |  |  |  |

Part B Optional Qualification Program

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| --- | --- | --- | --- |
| ***I Congresses (optional)***  Place Date Title of the contribution | | | |
| **1** |  |  |  |
| **2** |  |  |  |
|  |  |  |  |

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| ***II Semester abroad (optional)***  Place Date Purpose/Methods learnt | | | |
| **1** |  |  |  |
| **2** |  |  |  |
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| ***III Inter-Institute Exchange (optional)***  Institute Place Date Purpose/Methods learnt | | | |
| **1** |  |  |  |
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**Semester abroad *(optional)***

Date: Institute and Place: Purpose of the visit / Method learned:

**Signatures**

PhD Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_

Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_

Co-Supervisor (FLAIR): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_