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**« Comité de suivi INDIVIDUEL DE THESE » Report**

The CSI report should be filled on computer, signed by all, will be upload by the PhD student on **SYGAL by Monday 30 June 2025.**

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| **Composition CSI** | **NOM Prénom** | **Mail** | **Etablissement** |
| **Membre spécialiste (HDR)** |  |  |  |
| **Membre référent**  **(HDR ou non)** |  |  |  |
| ***(facultatif)* Autre Membre**  **(HDR ou non)** |  |  |  |

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| --- | --- | --- | --- | --- | --- | --- |
| **Name of the PhD student :** | | | | | | |
| **Email :** | | | | | | |
| **Date of the CSI:** | | | | | | |
| **Thesis starting date :** | | | | | | |
| **CSI pour une inscription en 2ème année** | | **3ème année** | | | **4ème année ou +** | |
| **COTUTELLE :** | **yes** | | **country :** |  |  | **no** |
| **FINANCEMENT :** |  | |  |  |  |  |
| **Title of the Thesis** | | | | | | |
| **Laboratory** | | | | | | |
| **- Supervisor**  **E-mail :**  **- Co-Supervisor**  **E-mail :** | | | | | | |

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|  | **Opinions Reviews (positive and negative) of the following points  :** | | |  | |  | **AVIS** | | |
| A | | B | C | D | E |
|  | **Scientific Aspects** | | |  | |  |  |  |  |
| 1 | Quality of renderings (report and presentation) | | |  | |  |  |  |  |
| 2 | Quality of the oral presentation | | |  | |  |  |  |  |
| 3 | State of the art quality | | |  | |  |  |  |  |
| 4 | Clarity of the definition of objectives related to the state of the art | | |  | |  |  |  |  |
| 5 | Quality of the analysis of experimental results | | |  | |  |  |  |  |
| 6 | Control of the subject | | |  | |  |  |  |  |
| 7 | Progress of the thesis project | | |  | |  |  |  |  |
| 8 | Definition of future work in terms of scientific objectives and timetable | | |  | |  |  |  |  |
| 9 | Number of oral presentations since the beginning of the thesis | | |  | |  |  |  |  |
| 10 | Number of poster presentations since the beginning of the thesis | | |  | |  |  |  |  |
| 11 | Number of Publications/Review/Patents since the beginning of the thesis | | |  | |  |  |  |  |
|  | | **COMMENTS on points 1-11:** | | | | | | |
|  | **Conditions of progress** | | | |  |  |  |  |  |
| 12 | Material required for the realization of the project/subject | | | |  |  |  |  |  |
| 13 | Integration into the research unit | | | |  |  |  |  |  |
| 14 | Notice on the thesis supervision (formal and informal meetings, reports, discussions, presentations, etc.) | | | |  |  |  |  |  |
| 15 | Opportunity to develop its scientific culture (conferences, seminars, etc.) and its (inter)national openness (mobility) | | | |  |  |  |  |  |
|  | | **COMMENTS on points 12-15 :** | | | | | | |
|  | **Professional training and projects** | |  | | |  |  |  |  |
| 16 | Training courses followed | | | |  |  |  |  |  |
| 17 | Scientific Integrity Training | | | |  |  |  |  |  |
| 18 | Preparation of the professional project | | | |  |  |  |  |  |
|  | | **COMMENTS on points 16-18 :** | | | | | | |

**CSI COMMENTS:**

Recommendations/strengths/possible comments:

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| **The CSI points out particular points of vigilance** | yes : *Specify*…………………………..  no |
| **The CSI alerts the doctoral school[[1]](#footnote-1)** | yes  no |

**Comments / specific requests from the PhD student:**

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**Comments / specific requests from the supervisor:**

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**Opinion of CSI about the re-registration:**

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| --- | --- |
| **Opinion of CSI about the re-registration:** | *Favourable, reserved or unfavorable* |
| If relevant: Opinion of CSI about on a request for **extension of the duration of the thesis**: |  |

**Signatures at the end of the meeting:**

|  |  |
| --- | --- |
| A………………………………………. Le…………………………………………………….. | |
| CSI members |  |
| Supervisor(s) (DT, coDT, Co-encadrant) |  |
| PhD Student |  |

1. One ofCSI members contacts one of the members of the EDNC management team and sends the report non-signed [↑](#footnote-ref-1)