



## Mid Project Review Form

### ***Independent Project – Module 1***

Student Name:

Project Title:

Mentor Name:

Date of Review:

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### **1. Project Overview**

Briefly describe your project so far. What have you been working on?

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### **2. Progress Against Your Aim**

**What was your original aim?**

*(You can adjust this slightly if your project has evolved)*

**To what extent have you worked towards this aim so far?**

- Not yet started
- Just started
- Making steady progress
- Well underway

**Explain your answer:**

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### **3. Progress Against Objectives**

List your original objectives and comment on your progress:

Objective	Progress Made	Completed / In Progress / Not Started




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#### 4. Research and Learning

What research have you carried out so far?  
*(Include different types of sources if possible)*

What have you learned from your research?

Have any of your sources changed your thinking or direction? Explain how.

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#### 5. Project Development

What practical work, skills or development have you completed?  
*(e.g. designs, practice, experiments, building, creating, etc.)*

What progress are you most proud of so far?



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## 7. Changes to Your Project

Has your project changed since you started?

- Yes  
 No

If yes, explain what has changed and why:

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## 8. Evidence of Your Work

Tick what you have completed so far:

- Bibliography started/updated  
 Research notes / drafts / sketches  
 Log of hours  
 Reflective journal entries

Is there anything missing or that needs improving?

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## 9. Planning the Next Stage

What still needs to be completed in your project?

What are your next three steps?

- 1.
  - 2.
  - 3.
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## 10. Time Management

How well have you managed your time so far?

- I need to improve my time management  
 It has been okay  
 I am managing my time well

What will you do to stay on track?



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## 11. Reflection

What have you learned about yourself during this project so far?

What would you do differently if you were starting again?

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### Mentor Feedback (to be completed during meeting)

Strengths identified:

Areas for development:

Agreed next steps:



**Sign-Off**

**Student Name:**

**Student Signature:**

**Date:**

**Mentor Name:**

**Mentor Signature:**

**Date:**