

**Final Report and Feedback Form**

**International Postdoctoral Fellowship 2025**

**Note:** This final report and feedback form consists of 3 parts: 1) General information 2) Final report of the research project and 3) Satisfactory level. Please complete this form using a computer, and sign by hand or e-signature. This form is to be completed by Mentor/supervisor.

**Part I: General information**

Mentor/supervisor’s name and surname:…………………..................................................……..........……………..

International postdoctoral researcher’s name and surname:……………………………….........………………….

Affiliated Faculty/College/Institute: ……………………………………….........................................................… Department:………………………………………………………………….

Tel.: ……………………………………...........………….. E-mail: …………………………………………………………………..…………

**Part II: Final report of the research project**

Title of the research project: …………………………………………………………

Research field (by subject ranking): ……………………………………………………………………………………………..

Research project duration:………….(dd/mm/yy) to (dd/mm/yy)…………………..

Summary of the research project:

…………………………………………………………………………………………………………………………………………………………………

…………………………………………………………………………………………………………………………………………………………………

Project output (Please specify details of publications, patents, conferences, workshops, awards, certificates or other relevant matters.)

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**Part III: Satisfactory level** Pleasecheck (✓) the appropriate boxes as follows:

**5** = Very satisfied **4** = Satisfied **3** = Average **2** = Unsatisfied **1** = Very unsatisfied

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **No** | **Details** | **Score** | | | | |
| **5** | **4** | **3** | **2** | **1** |
| **Information, Facilitation and Arrangements** | | | | | | |
| 1 | Financial support by Mahidol University |  |  |  |  |  |
| 2 | Information provided by the affiliated Faculty/ College/ Institute prior to arrival and during the stay |  |  |  |  |  |
| 3 | Onsite arrangements by the affiliated Faculty/ College/ Institute |  |  |  |  |  |
|  | * Accommodation |  |  |  |  |  |
|  | * Office, laboratory, equipment, and other facilities |  |  |  |  |  |
| **Experience Gained** | | | | | | |
| 4 | Sharing and exchanging of professional/academic experiences |  |  |  |  |  |
| 5 | Enriching personal/cultural experiences |  |  |  |  |  |
| 6 | Expanding academic network |  |  |  |  |  |
| 7 | Learning more about Mahidol University |  |  |  |  |  |
| **Satisfaction** | | | | | | |
| 8 | Overall satisfaction |  |  |  |  |  |

**More comments/suggestions to improve the program**

……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

Signature: ……………………………………………………….. Mentor/Supervisor

……………………………..……(Full name)…………………

…………………………..………(Position)…………………….

…………………..…..……….(Faculty)………………………..

Signature: ……………………………………………………….. International Postdoctoral Researcher

…………………………..……(Full name)…………..……….

Date \_\_\_/\_\_\_\_/\_\_\_\_

**Thank you for your kind cooperation.**

Please submit the completed form (Form IR-PD4) to the Global Partnerships Division, Office of the President, for consideration and acknowledgement by the Committee

upon the completion of the funding program.