

Swedish college of Engineering & Technology

Department of electrical engineering

Monthly Progress Report



| | |
|------------------------|-------------|
| Project Title : | |
| Supervisor Name | |
| Group Details | |
| Roll Number | Name |
| | |
| | |
| | |
| | |
| | |

For the Month of _____ 20__

Submitted on date _____

T O BE FILLED BY SUPERVISOR

Project Title _____

**To be filled during the first week of each month*

Date _____

| | |
|---------------------------|--|
| Name of Supervisor | |
| Work Assigned | |

Supervisor Signature

**To be filled during the last week of each month*

| | |
|---|--|
| <u>Percentage of Assigned work completed</u> | |
|---|--|

Supervisor Signature