



FEEDBACK FORM FOR OUTBOUND RESEARCHER

Document No. : FM-IL-03-00

Effective Date: November 1, 2023

Name (Surname, First Name Middle Initial):

Academic Program:

Student #:

Host University:

Host Professor:

Period of stay:

Research Project Title:

Type of research activity you are currently doing:

☐ Dissertation ☐ MS Thesis ☐ BS Thesis ☐ Research Fellow ☐ Post Docs ☐ None of these

Type of Respondent: (Note: Other researcher means that you are not a student or a faculty member)

☐ Research Student ☐ Faculty Researcher ☐ Other Researcher

Short description of your research activities in your host institution and/or Title of Study.
(Kindly attached evidence of output i.e pictures)

Significant Learnings and Insights:

Signature over printed name of the student

Note: Kindly submit the fully-accomplished form with e-copies of your evidence/s of work/s (such as the pictures, videos, among others) at the host institution to ilrad@mapua.edu.ph.