**International Doctorate Mobility Annex VII-B**

**Report of the accomplished research at the receiving institution**

Supervisor at the receiving institution:

Student:

Start and end dates of the research period: from [day/month/year] to [day/month/year].

Research accomplished at the receiving institution:

Was the component successfully completed by the student? [Yes/No]

Receiving institution evaluation [Positive/Negative]:

Date *Signature* of the supervisor at the receiving institution *Receiving institution stamp (if not available, please state so and explain the reason why hereafter)*