



# Ph.D. Program Medical Research - International Health

# Ph.D. Project Target Agreement

between

Name of Ph.D. Candidate			
and			
Local Supervisor (Title, Name and Institution)			
Habilitated LMU Supervisor (Title, Name and Institution)			
Direct LMU Supervisor (Title, Name and Institution)			
3 <sup>rd</sup> LMU Supervisor (Title, Name and Institution, if applicable)			
Title of the Ph.D. Project:			

This Target Agreement serves to establish a formal understanding between the Ph.D. candidate and the involved supervisors with respect to the conduct of the Ph.D. research project. It is understood that any research activity is subject to incidents and unforeseen changes. Therefore, the agreement may be modified in the course of the conduct of the project, as to be approved by the candidate and the supervisors. A Target Amendment will be added after attending Module Block II in Munich.

This agreement is subdivided into a chronological listing of feasible targets, a statement of the expected outcome of the study, and statements of expected activities during Research Period I and II until the thesis submission at the end of Research Period II. Please remember that all candidates are expected to submit their results for publication during their Ph.D. studies.

Please scan the final version of the Ph.D. Project Target Agreement containing all pages and all supervisor's signatures and send it to cih.phd-documents@lrz.uni-muenchen.de by the end of the first month of Research Period I.

















# Project Objective

Please outline the aim of your Ph.D. project (what is it trying to prove) and describe the expected outcome. Which personal benefit do you expect? Where and in which way are the results to be published?				















### **Project Targets**

Please describe the activities and/or expected outcomes during each period. Please provide general information such as e.g. participation in courses at the CIH<sup>LMU</sup> in Munich, data collection, submission to the ethics committee, supervisor visits or literature review. In addition, please include more specific information, such as reasons for supervisor visits, mentioning of laboratory procedures or use of predefined questionnaires.

Be brief and concise, use bullet points instead of complete sentences, and do not exceed the space provided.

<u>Please note:</u> Documents that need to be submitted to the Ph.D. program coordination during the respective period are written in orange below.

	Period	
Module Block I in Munich	Oct - Dec	
	Jan – Feb Supervision & Target Agreement RPR I	
Research period I	March – April RPR II	
	May – June RPR III	













### $\text{CIH}^{\text{\tiny{LMU}}}$ CENTER FOR INTERNATIONAL HEALTH We empower health professionals

Research period I	July – Aug RPR IV	
	Sep – Oct RPR V	
	Nov – Dec RPR VI	
Module Block II in Munich	Jan – March	
Research period II	April Target Amendment I RPR VII	
	May – June RPR VIII	















### $\text{CIH}^{\text{\tiny{LMU}}}$ CENTER FOR INTERNATIONAL HEALTH We empower health professionals

	July – Aug	
	RPR IX	
	Sep – Oct	
	RPR X	
=		
Research period II	Nov – Dec	
earch	RPR XI	
Res		
	Jan - Feb	
	RPR XII	
	March – April	
	RPR XIII	
	Thesis submission	
Thesis evaluation	May – Oct	
	Thesis Review	
The	Nov	
	Thesis Defense	















## Meetings planned during Research Period I

Please hriefly state	the purpose of each		to meet during Research I	Period I.
ricase briefly state	The purpose of each			
1				
Please state which	n courses/workshop arch Period I. Pleas	os/conferences you a	ended during Research F re planning to attend wh urpose of the course/wo	ere and

















Additional qualifications and personal career goals  Please outline plans and activities that you will conduct during Research Period I concerning your personal career (beyond your Ph.D. studies, education, work activity, networking). Are there any additional qualifications required for the completion of the Ph.D. project that you will collect outside of the regular curriculum?			
Place	Date	Ph.D. Candidate's Signature	
Place	Date	Local Supervisor's Signature	
Place	Date	Habilitated LMU Supervisor's Signature	
Place	Date	Direct LMU Supervisor's Signature	
Place	Date	3 <sup>rd</sup> LMU Supervisor's Signature (if applicable)	



Place



Date





Ph.D. Program Coordination's Signature

