SCJ Centers and Institutes Periodic Progress Report Form (January 2022)
Please refer to Rutgers University Centers and Institutes policy, Section 10.1.5

CHECK ONE:

CENTER

INSTITUTE

CI NAME: ________________________________________________________________

DIRECTOR(S) NAME: ______________________________________________________

PHONE #: ___________________ EMAIL: ________________________________

CI Periodic Progress Reports should include (as appropriate), but not be limited to, the information specified below. Additional information may be requested by the Dean.

CHANGES FROM PRIOR YEARS: An assessment of changes from prior years in the CI's status.

PROGRESS: A summary of progress toward the objectives cited in the CI proposal document and/or the prior progress report.

OBJECTIVES: Updated short- and longer-term objectives

QUANTITATIVE BENCHMARKS:

a. In a CI's initial periodic progress report, a listing of quantitative benchmarks should be accompanied by retrospective tables providing historical performance.

b. In subsequent progress reports, the CI's current performance with respect to its quantitative benchmarks should be added to the data compiled for prior years.

c. Financial Status. A year-end budget for the last 3 years showing all sources of income (i.e. grants, service fees, membership fees, F&A return, etc.) and expenses. Revenue and expense projections for the upcoming year.

PUBLICATIONS: A listing of publications that are a part of the CI's programs.

AWARDS AND PROPOSALS: A summary of the CI's research and other awards and proposals
(can be obtained from the Office of Sponsored Research).

PUBLIC/PRIVATE PARTNERSHIPS: A summary of public and private partnerships; indicate any resources (both financial and intellectual) that these partnerships have generated.

AUTHORIZED SIGNATURES:

I have read all the relevant Rutgers policies & guidelines pertaining to this request
☐ Yes  ☐ No

Director _______________________________  Date _______________________________

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SCJ Faculty Center Committee Comments & Recommendation

Comments:

Recommendation:

Print Name _______________________________  Signature _______________________________  Date _______________________________

SCJ Dean Comments and Recommendation

Comments

Recommendation

APPROVALS

Note: all Decanal Centers require Chancellor approval