

**PRI Review Form**

**TO BE COMPLETED BY IMPERIAL COLLEGE QUALITY ASSURANCE**

**The purpose of this review is to ensure that the research facilities and welfare support mechanisms at active PRIs remain appropriate**

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| **Name of Partner Research Institution:**  **(Give full title and address)** |  | |
| **PRI Code** |  | |
| **How many students in the previous 10 years have been registered to undertake their PhD at this PRI?** |  | |
| **Which Departments within the PRI itself have students worked at?** |  | |
| **Completion Rates in the last 5 years** |  | |
| **Have any complaints from students registered at the PRI been received by the College?** |  | |
| **A review of the research facilities available to students at the research institution, including, where relevant, facilities available to students within their individual Departments** |  | |
| **Please review details of welfare and pastoral support available to students at the PRI** |  | |
| **Have there been any major institutional changes since the PRI was originally approved?** |  | |
| **Comments on whether the reputation of the partner remains sound** |  | |
| **Any potential conflicts of interest** |  | |
| **Comments on whether there are there any issues with the business and ethical links of the partner, or country, which could bring the College into disrepute** |  | |
| **Confirmation that the proposed institution has adequate human, material and financial resources to continue to operate the arrangement successfully** | **Yes** | **No** |
| **Confirmation that there will be an appropriate and safe learning environment for students and staff** | **Yes** | **No** |
| **Completed by** | **Name and Title** | **Date** |
| **Signature:** | |