**TECHNOLOGY AND HUMAN RESOURCES FOR INDUSTRY PROGRAMME (THRIP)**

**MILESTONE AUDIT REPORT**

**SECTION A: PROJECT INFORMATION AS PER AGREEMENT BEWTEEN the dtic AND APPLICANT**

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| --- | --- |
| APPLICANT NAME |  |
| PROJECT NAME |  |
| PROJECT REFERENCE NUMBER |  |
| PROJECT DESCRIPTION |  |
| SECTOR |  |
| PROJECT SITE/LOCATION |  |
| PROJECT OWNER/ LEADER |  |
| BBBEE STATUS |  |
| DATE OF AUDIT |  |
| ORIGINAL APPROVED TOTAL AMOUNT |  |
| CLAIM STAGE (Y…M….) |  |

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| **SHAREHOLDING** | | | |  | | | | | | | | | | | | | | |
| Youth (18 to 35) |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Disability (Y/N) |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Gender |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Race |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Incorp. No / ID No Shareholder/Member |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Shareholder/Company/Group Structure/Members(Trusts) |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| SECTION B : PROJECT HUMAN RESOURCES (RESEACHERS, STUDENTS AND GRADUATES INVOLMENT INFORMATION) |
| Please complete the tables below as per the signed contract between the dtic and client, verify and comment on the progress or change of the status under each millstone in Section C. |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | RESEARCHERS INVOLVED IN THE PROJECT | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Please provide a breakdown of researchers (TIPTOP) according to the table below: *(Note: M=Male; F=Female; D=Disabled)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Race | | **African** | | | | **Coloured** | | | | | | **Indian** | | | | | | **White** | | | | | | **Other African countries** | | | | | **Total** |
| Gender | | M | F | | | M | | | F | | | M | | | F | | | M | | | | F | | M | | F | | |
| Above age of 35 | |  |  | | |  | | |  | | |  | | |  | | |  | | | |  | |  | |  | | |  |
| Youth | |  |  | | |  | | |  | | |  | | |  | | |  | | | |  | |  | |  | | |  |
| Disabled | |  |  | | |  | | |  | | |  | | |  | | |  | | | |  | |  | |  | | |  |
| Comments | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **STUDENTS INVOLVED IN THE PROJECT** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Please provide a breakdown of students involved in the project according to the table below: *(Note: M=Male; F=Female; Y=Youth,18 to 35yrs; D=Disabled)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Race | | **African** | | | | | | **Coloured** | | | | | | **Indian** | | | **White** | | | | | | **Other African Countries** | | | | | | **Total** |
| Gender | | M | | | F | | | M | | | F | | | M | | F | M | | | F | | | F | | | M | | |  |
| Above age of 35 | |  | | |  | | |  | | |  | | |  | |  |  | | |  | | |  | | |  | | |  |
| Youth | |  | | |  | | |  | | |  | | |  | |  |  | | |  | | |  | | |  | | |  |
| Disabled | |  | | |  | | |  | | |  | | |  | |  |  | | |  | | |  | | |  | | |  |
| Comments | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **GRADUATES INVOLVED IN THE PROJECT** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Please provide a breakdown of students involved in the project according to the table below: (Note: M=Male; F=Female; Y=Youth,18 to 35yrs; D=Disabled) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Race | | **African** | | | | | **Coloured** | | | | | | **Indian** | | | | | | **White** | | | | | | **Other African countries** | | | **Total** | |
| Gender | | M | | F | | | M | | | F | | | M | | | F | | | M | | F | | | | M | | F |
| Above age of 35 | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | |  | |  |  | |
| Youth | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | |  | |  |  | |
| Disabled | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | |  | |  |  | |
| Comments | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| SECTION C : PROGRESS ON MILESTONES (Progress on activities, Expenditure and Reasons) |
| *The progress reporting below must be as per the approved budget activities referenced in clause 7.7.1 of the Memorandum of Funding Agreement between the dtic and the project owner as required by paragraph 9.1, of the THRIP guideline.* |

|  |  |  |  |
| --- | --- | --- | --- |
| Year abc | | | |
| Milestone xyz | | | |
| Milestone activities/items | **Progress on approved items** | **Expenditure**  **R.00** | **Reasons for variance** |
| Applied research activities |  |  |  |
| Student bursaries |  |  |  |
| Graduates |  |  |  |
| Use of Student involvement incentive |  |  |  |
| Researchers involved in the project |  |  |  |
| Physical relocation of researchers (TIPTOP) |  |  |  |
| Contractual deviations |  | | |
| General comments and opinion on the technical merits of work concluded and or project risks observed |  | | |

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| SECTION D : SUPPORTING DOCUMENTS TO BE ATTACHED | | | |
| NO. | **SUPPORTING DOCUMENTS** | **YES** | **NO** |
| 1 | Certified copies of Invoices, proof of payments as per Appendix A |  |  |
| 2 | Proof of contribution for the subsequent disbursement |  |  |
| 3 | Certified ID Copies and proof of registrations for the students involved in the project |  |  |
| 4 | Latest audited/reviewed Annual Financial Statements |  |  |

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| SECTION E: RECOMMENDATIONS AND ACTIONS |
| 1. Based on the technical progress verified and expenditure incurred on the approved milestone deliverables entered into between the dtic and xyz……… , it is recommended that a subsequent claim amount of R----------------,00 (for Milestone abc) be paid to the applicant;  2. It is also recommended that the following actions be considered to improve the quality and or value for money of the R&D outputs and or project governance and or expenditure controls: |

**SIGNATURES**

**We the undersigned declare that the information provided and contained in this report is an accurate and true reflection of the information obtained and verified during audit process**

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| **Compiled by:**  **Consulting Firm:**  **Name and Surname:**  **Signature :**  **Date :** | **Checked by :**  **Consulting Firm:**  **Name and Surname :**  **Signature :**  **Date :** |