

Doctoral Review Committee (DRC) of Ph. D. Scholar Periodic Review Report

(Containing more than one pages - please print this form back to back)

Scholar's Roll Number		
Scholar's Name		
Scholar's Department		
Period of Review (Month & Year)	From:	To:
Date of Periodic Review meeting		
Date of Last Periodic Review meeting		
Scholar Joined the Ph.D. Program on	Month	Year
Details of Thesis Supervisor (s)		Details of Thesis Coordinator(if any)
Name: (1)	(2)	
Designation:		
Contact No.:		
List of Courses done (with Grade obtained)	S. No.	Name
	1	
	2	
	3	
	4	
	5	
	6	
	7	
	8	
	9	
10		
Course Work Completed in	Month	Year
Latest CGPA		
Thesis Credits completed till Last Semester	Last Sem:	Thesis Credits:
Whether Comprehensive Exam Cleared?	Yes / No : (If yes, : Month	Year
Whether State of the Art Completed?	Yes / No : (If yes, : Month	Year
Whether Open Seminar Completed?	Yes / No : (If yes, : Month	Year
Whether Synopsis Submitted?	Yes / No : (If yes, : Month	Year
Whether Thesis Submitted?	Yes / No : (If yes, : Month	Year

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Recommendation of the DRC during the last meeting: (Use additional pages, if required.)

Progress during the last six months :

S. No.	Description of the work undertaken	Status	Remarks by the Supervisor(s)
1			
2			
3			
4			
5			

Signature of Ph.D. Scholar	Signature of Thesis Supervisor (s)/Cordinator (if any)
Signature & Name of the Examiner - 1	Signature & Name of the Examiner - 2
Signature & Name of the Examiner - 3	Signature & Name of the Examiner - 4
Signature & Name of the Examiner - 5	Signature & Name of the Examiner - 6
Recommendation / Rejection by the HOD with Remarks (if any)	
Recommendation / Rejection by the DOAR with Remarks (if any)	
Approval / Rejection by the Chairperson AC with Remarks (if any)	