**Doctoral committee review report – New Batch**

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| --- | --- |
| **BRANCH** |  |
| **Date of meeting** |  |

**PART – A**

(To be filled by Candidate)

1. Name of the Student & Roll Number :
2. Mode of registration (FT/PT) :
3. Month & Year of Joining :
4. Name of the Supervisor & Affiliation :
5. Name of the Co-Supervisor (if any)

& Affiliation :

1. Proposed Area / Title of Research :
2. Fee dues :

Student signature

**PART – B**

(To be filled by Supervisor)

1. Details of the ‘Doctoral Committee’ members:

|  |  |  |  |
| --- | --- | --- | --- |
| **S.No.** | **Name of the Member** | **Designation/Affiliation**  **Phone no.** | **Acceptance signature** |
| 1 | HoD/HoD Nominee: |  |  |
| 2 | Internal Dept., Expert: |  |  |
| 3 | Other Dept., Expert: |  |  |
| 4 | Expert from outside university: |  |  |
| 5 | Research Supervisor: |  |  |

1. Pre-PhD course work details recommended by ‘Doctoral Committee’

|  |  |  |  |
| --- | --- | --- | --- |
| **S.No.** | **Code No.** | **Course Name** | **Planned to complete during M. Tech course / summer / winter** |
| 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 4 |  |  |  |

1. Abstract research calendar proposed by ‘Doctoral Committee’

(Examples of activities: course work, literature survey, experimentation, publications, report writing, submission -------------)

|  |  |
| --- | --- |
| **Activity** | **Expected month & year of completion** |
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|  |  |

1. Describe briefly the proposed area of work: (add separate sheet if needed)

**Signature of the Supervisor Signature of the HoD**

***(Note:*** *4 copies of this document are to be prepared (type written only) for student, supervisor, department and R&D section. The report should be stapled and light blue taped, equidistant on both sides.)*