



Ph.D. Students – Semester-wise Research Progress Report
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Student Name: _____ Semester of Ph.D. Registration: _____

E-Mail ID: _____ Enrolment No. : _____

Department: _____ School: _____

Date of presentation: _____

Thesis Topic:

The **Doctoral Committee** has found the progress of Mr./Ms. _____ during Monsoon/Spring 20_ to be satisfactory / unsatisfactory . **(Please attach a detailed report with comments and specific recommendations.)**

Chairperson	Signature _____ Date _____
Member 1	Signature _____ Date _____
Member 2, if any	Signature _____ Date _____
Research Advisor	Signature _____ Date _____
Research Co-advisor, if any	Signature _____ Date _____



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Evaluation of						
	Motivation	Research Problem	Required Knowledge & Skills	Accomplishments	Future Work Plan	Other (Specify)
Excellent/ Very Good/ Satisfactory/ Not Satisfactory						

Further Comments and Specific Recommendations:

Signatures

Doctoral Committee Chairperson:

Research Advisor:

Research Scholar: