**Performa-I**

**PERFORMA FOR CONSENT OF SUPERVISOR FOR ADMISSION TO Ph.D.**

**PROGRAMME DEPARTMENT OF \_\_\_\_\_\_\_\_\_\_\_\_ CATEGORY \_\_\_\_\_\_\_\_\_**

1. Name of candidate : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Father’s name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Set roll no. (entrance exam) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Proposed research topic/area \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Name of supervisor : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| 1. | 2. |

1. Name of supervisor (ii) / co-supervisor:

(if any) [attach brief bio-data

(if supervisor from other institute)

& separate consent form]

 SIGNATURES OF CANDIDATE

 DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Supervisor**

1. Following are the details of the research scholars, already register/to be registered under my supervision pursuing their Ph.D. on full time/part time basis:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Sr. No. | Name of research scholar | Registration No. | Whether the research scholar is full time (with/ without fellowship) /part time  | Place of Ph.D registration  |
| 1. |  |  |  |  |
| 2. |  |  |  |  |
| 3. |  |  |  |  |
| 4. |  |  |  |  |
| 5. |  |  |  |  |

1. Agreed to act as supervisor : YES/NO

 (Strike whichever is not applicable)

1. Certified that the above information, furnished/given by me is true and correct to the best of my knowledge and nothing has been concealed therein and the consent to supervise the above research scholar is given, keeping in view the approved Rules of the institute.

SIGNATURES OF SUPERVISOR

 DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Performa-I**

**Chairperson, DRC**

1. Information given/furnished by the supervisor at Sr. No. A above is verified
2. RECOMMENDED/NOT RECOMMENDED

(strike whichever is not applicable)

 SIGNATURES OF CHAIRMAN, DRC

 DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 SIGNATURE OF HOD\_\_\_\_\_\_\_\_\_\_\_

 DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dean (Academics)

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**Performa-II**

**REGISTRATION FORM FOR PH.D. STUDENTS (SEMESTER WISE)**

**ACADEMIC SECTION**

1. Department : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Semester (ODD/EVEN) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. a) Name of the student : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

b) Registration No. : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

c) Email : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

d) Mobile No. : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Category : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(General/SC/ST/OBC/PH)

1. Ph.D registration : Yes / No

Confirmed

1. Details of Fee deposited : Receipt No.. \_\_\_\_\_\_\_Dated \_\_\_\_\_\_Amount \_\_\_\_\_
2. Research Topic/Title of Research: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(in capital letters) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Name of Supervisor (s) : 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

: 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Whether Progress Report : Yes /No

Submitted to Supervisor (s)

1. Details of subjects to be registered in this semester

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Sr. No. | Subject code  | Subject title  | L | T | P |
| 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |

1. Details of courses already passed :

|  |  |  |  |
| --- | --- | --- | --- |
| Sr. No. | Subject code | Subject title  | Grade (S/US) |
| 1. |  |  |  |
| 2. |  |  |  |

1. Work done during the previous semester (attach extra sheet, if needed): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Performa-II**

1. Publications (till date)

a) Journal : WOS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Scopus\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Peer Reviewed \_\_\_\_\_\_\_\_\_\_\_UGC/AICTE Approved\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

b) Conferences: International \_\_\_\_\_\_\_\_\_\_\_\_\_\_National\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

UNDERTAKING

I undertake that my registration is provisional and confirmation is subject to Satisfactory

Annual progress Report

Signatures of the student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ­­­­­­­­­­­

Regd No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Recommendations of Supervisor(s):

Name &Signatures of Chairperson, DRC with date

Name &Signature of HOD with date

Dean(Academics)

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**Performa-III**

**PERFORMA PROGRESS REPORT FOR PH.D. STUDENTS (ANNUAL)**

1. Department : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Semester : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Name of the student : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Enrollment/ : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Registration No.

1. Approved title : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 of the thesis

1. Supervisor : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Supervisor-II/ : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Co-Supervisor

1. Work done during the previous semester : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (extra sheet may be attached, if needed)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Publication, if any, during the a) Journal : WOS \_\_\_\_\_\_\_\_\_ Scopus\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Previous semester Other Peer Reviewed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 UGC/AICTE Approved\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 b) Conferences: International \_\_\_\_\_\_National\_\_\_\_\_\_\_\_ 10. Report on Presentation:

|  |
| --- |
|  |

Signatures of the student

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Recommendations

|  |
| --- |
|  |

 Name & Signatures of the Supervisor(s)

 Signatures of DRC and RPC/RAC members

 Dean (Academics)

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**Performa-IV**

**PERFORMA FOR RESEARCH PLAN PRESENTATION FOR CONFIRMATION OF PH.D REGISTGRATION**

 Date of Presentation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Venue\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Full Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2. Department \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Provisional Enrollment No. \_\_\_\_\_\_\_\_\_\_\_ 4. Date of Enrollment \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Academic Session\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 5. Category under which admitted \_\_\_\_\_\_\_

6. **Particulars of course works in which registered/already passed**

|  |  |  |  |
| --- | --- | --- | --- |
| S. No. | Subject Code | Grade Obtained | Semester & Academic Session  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

7. **Title of Research Work Proposed in Research Plan (in capital letters)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. **Names of supervisor(s) with designation and affiliation**

1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Summary of the report and presentation (Please put Y in the corresponding column)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Criteria** | **Unsatisfactory** | **Satisfactory** | **Good** | **Excellent**  |
| Originality/Research |  |  |  |  |
| Significance of the research |  |  |  |  |
| Technical relevance |  |  |  |  |
| Clarity of writing |  |  |  |  |
| Does the report clearly indicate objective, scope & methodology? |  |  |  |  |

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**Performa-IV**

**Final Recommendations**

1. Recommended with no changes

 (ii) Recommended if certain minor revisions are made

(iii) Student should prepare a major revision and present seminar within 2 months again

(iv) Rejected

**If recommended on selection at i or ii , Finalized Research Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Finalized Research Objectives:**

**1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**4.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**5.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Additional comments and suggestions by the External Member(s) (if required, separate sheet may be attached):**

**DRC and RAC /RPC Members (Name & Signature)**

|  |  |  |
| --- | --- | --- |
|  | 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | 3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | 5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 6. Supervisor \_\_\_\_\_\_\_\_\_\_\_  |

Sign. of Chairperson, DRC : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sign of External Expert : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name with designation : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dean (Academics)

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**Performa-V(A)**

**PERFORMA FOR RECOMMENDATIONS FOR EXTENSION OF FELLOWSHIP AFTER TWO YEARS ( WITHOUT UP-GRADATION TO SRF)**

|  |  |
| --- | --- |
| Name of the scholar |  |
| Regn. No. |  |
| Research topic |  |
| Department |  |
| Date of registration and date of joining |   |
| Name of supervisor (s) | 1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Course work completed | Yes/ No\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Registration confirmed  | Yes / No \_\_\_\_\_\_\_\_ if Yes, wef \_\_\_\_\_\_\_\_\_\_\_Letter No. \_\_\_\_\_\_\_\_  and Date\_\_\_\_\_\_\_\_\_\_\_\_  |
| Paper publications (encl. Copies) | SCI\_\_\_\_\_\_SCIE\_\_\_\_\_SSCI \_\_\_\_\_\_\_AHCI\_\_\_\_\_\_\_\_\_SCOPUS\_\_\_\_\_\_\_\_\_Any peer reviewed indexed journal in NIRF ranking\_\_\_\_\_\_\_\_\_\_\_UGC/AICTE Approved\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Peer Reviewed Journal \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_( with Impact Factor ) Conferences : International \_\_\_\_\_\_\_\_\_\_\_National \_\_\_\_\_\_\_\_   |

 UNDERTAKING BY CANDIDATE

|  |
| --- |
| My proposed work Plan is enclosed, I undertake that I will stick with the proposed work plans |

DATE\_\_\_\_\_\_\_\_

 NAME & SIGNATURE OF SCHOLAR

RECOMMENDATIONS OF SUPERVISOR (S)

|  |
| --- |
| It is certified that student is regular and working satisfactorily. Further it is recommended for extension of fellowship for one year on the basis of work progress till date |

 NAME & SIGNATURE OF SUPERVISOR(S)

Page- 1/2

**Performa-V(A)**

**PERFORMA FOR RECOMMENDATIONS FOR EXTENSION OF FELLOWSHIP AFTER TWO YEARS ( WITHOUT UP-GRADATION TO SRF)**

RECOMMENDATIONS OF DRC CONCERNED AND RPC/ RAC

|  |
| --- |
|  Recommended for extension of fellowship for \_\_\_\_\_\_\_\_\_\_\_ years /\_\_\_\_\_\_\_\_\_\_\_ month   w.e.f. \_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

DRC and RAC /RPC Members (Name & Signature)

|  |  |  |
| --- | --- | --- |
|  | 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | 3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | 5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |

CHAIRMAN DRC /HOD \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DEAN (ACADEMICS)

Recommended for Approval

 DEAN (ACADEMICS)

DIRECTOR

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**Performa-V**

**PERFORMA FOR RECOMMENDATIONS FOR ENHANCEMENT (SRF) AND EXTENSION OF FELLOWSHIP AFTER TWO YEARS**

|  |  |
| --- | --- |
| Name of the scholar |  |
| Regn. No. |  |
| Research topic |  |
| Department |  |
| Date of registration and date of joining |  |
| Name of supervisor (s) | 1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Course work completed | Yes/ No\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Registration confirmed  | Yes / No \_\_\_\_\_\_\_\_ if Yes, wef \_\_\_\_\_\_\_\_\_\_\_Letter No. \_\_\_\_\_\_\_\_  and Date\_\_\_\_\_\_\_\_\_\_\_\_  |
| Paper publications (encl. Copies) | SCI\_\_\_\_\_\_SCIE\_\_\_\_\_SSCI \_\_\_\_\_\_\_AHCI\_\_\_\_\_\_\_\_\_SCOPUS\_\_\_\_\_\_\_\_\_Any peer reviewed indexed journal in NIRF ranking\_\_\_\_\_\_\_\_\_\_\_UGC/AICTE Approved\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Peer Reviewed Journal \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_( with Impact Factor ) Conferences : International \_\_\_\_\_\_\_\_\_\_\_National \_\_\_\_\_\_\_\_   |

 UNDERTAKING BY CANDIDATE

|  |
| --- |
| My proposed work Plan is enclosed, I undertake that I will stick with the proposed work plans |

DATE\_\_\_\_\_\_\_\_

 NAME & SIGNATURE OF SCHOLAR

RECOMMENDATIONS OF SUPERVISOR (S)

|  |
| --- |
| It is certified that student is regular and working satisfactorily. Further it is recommended for enhancement (SRF) and extension of fellowship for one year on the basis of work progress till date |

 NAME & SIGNATURE OF SUPERVISOR(S)

Page- 1/2

**Performa-V**

RECOMMENDATIONS OF DRC CONCERNED AND RPC/ RAC CONCERNED

|  |
| --- |
| Recommended for enhancement (SRF) and extension of fellowship for one year. Proposed List of Experts for grant of SRF is as under:Name of External Expert Designation and Department 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_4.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_5.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

 DRC and RAC /RPC Members (Name & Signature)

|  |  |  |
| --- | --- | --- |
|  | 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | 3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | 5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |

 CHAIRMAN DRC /HOD \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 For selection of external expert

 Dean (A)

 Director

 RECOMMENDATIONS OF REVIEW COMMITTEE

|  |
| --- |
|  |

 Enhancement ( SRF) Recommended w.e.f.\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Extension of Fellowship Recommended w.e.f. \_\_\_\_\_\_\_\_\_\_\_\_ TO \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Review Committee Members \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_

 Supervisor Co-Supervisor External Expert Chairman DRC/ HOD

 (Out side Institute)

 Recommended for Approval

 Dean (A)

 DIRECTOR

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**Performa-VI**

**PERFORMA FOR RECOMMENDATIONS FOR EXTENSION OF FELLOWSHIP AFTER THREE / FOUR YEARS**

|  |  |
| --- | --- |
| Name of the scholar |  |
| Regn. No. |  |
| Research Topic |  |
| Department |  |
| Date of registration and date of joining |  |
| Name of supervisor |  |
| Course work completed | Yes/No\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Registration confirmed  | Yes /No \_\_\_\_\_\_\_\_\_\_\_\_ if Yes, wef \_\_\_\_\_\_\_\_\_\_\_ Letter No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  and Date\_\_\_\_\_\_\_\_\_\_\_\_  |
| Paper publications (encl. Copies) | SCI\_\_\_\_\_\_SCIE\_\_\_\_\_SSCI\_\_\_\_\_\_\_\_\_AHCI\_\_\_\_\_\_\_\_\_SCOPUS\_\_\_\_\_\_\_\_\_\_\_\_\_\_Any peer reviewed indexed journal in NIRF Ranking\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_UGC/AICTE Approved\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Peer Reviewed Journal \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_( WITH IMPACT FACTOR ) CONFERENCES : International \_\_\_\_\_\_\_\_\_\_\_National \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_ |

UNDERTAKING BY CANDIDATE WITH TIMELINE

|  |
| --- |
| My proposed work Plan is enclosed, I undertake that I will stick with the proposed work plans |

SPECIFIC REASONS FOR REQUEST FOR EXTENSION OF FELLOWSHIP

|  |
| --- |
|  |

DATE\_\_\_\_\_\_\_\_ NAME & SIGNATURE OF SCHOLAR

RECOMMENDATINS OF SUPERVISOR (S)

|  |
| --- |
|  |

 NAME & SIGNTURE OF SUPERVISOR(S)

 RECOMMENDATIONS OF DRC CONCERNED AND RPC/ RAC

|  |
| --- |
|  Recommended for extension of fellowship for \_\_\_\_\_\_\_\_\_\_\_ years /\_\_\_\_\_\_\_\_\_\_\_ month. |

DRC and RAC /RPC Members (Name & Signature)

|  |  |  |
| --- | --- | --- |
|  | 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | 3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | 5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |

CHAIRMAN DRC /HOD \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Performa-VI**

**PERFORMA FOR RECOMMENDATIONS FOR EXTENSION OF FELLOWSHIP AFTER THREE / FOUR YEARS**

 DEAN (ACADEMICS)

Following Review Committee is Constituted:

1 . DEAN (A) OR NOMINEE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. CHAIRMAN DRC / HOD

2. SUPERVISOR ( S )

DEAN (ACADEMICS)

 RECOMMENDATIONS OF REVIEW COMMITTEE:

|  |
| --- |
|  |

 Extension of Fellowship Recommended w.e.f .\_\_\_\_\_\_\_\_\_\_\_\_\_\_To \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Review Committee Members \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Supervisor Co-Supervisor Chairman DRC/HOD

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dean (a)/ Nominee

Recommended for Approval

Dean (A)

 DIRECTOR

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**Performa-VII**

**RESEARCH SCHOLARS WORK PLAN FOR EXTENSION OF FELLOWSHIP**

|  |  |
| --- | --- |
| Name of the scholar |   |
| Regn. No. |  |
| Research topic |  |
| Department |  |
| Date of Registration |  |
| Name of supervisor | 1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Work progress ( previous year) |  |
| Proposed work / research scholars work plan for next semester with time line and pert chart |

|  |  |  |
| --- | --- | --- |
| S. No. | Activity | Target Date |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
| 4. |  |  |
| 5. |  |  |
| 6. |  |  |
| 7. |  |  |
| 8. |  |  |

 |

 NAME & SIGNATURE OF CANDIDATE

NAME & SIGNATURE OF SUPERVISOR : 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Page 1/1

**Performa-VIII**

**UNDERTAKING FOR SEEKING PERMISSION FOR SYNOPSIS SEMINAR FOR PH.D THESIS SUBMISSION**

|  |  |  |
| --- | --- | --- |
|  | Name of the Research Scholar |  |
|  | Registration No. |  |
|  | Date of conformation of registration  |  |
|  | Department |  |
|  | Thesis Title |  |
|  | Whether objectives of Research plan achieved ( mention objectives)  |  |
|  | Whether publications completed for Ph.D Thesis submission as per Ph.D Rules & Regulations applicable (Mention details of papers published in journals with impact factor and in proceedings of International Conferences )  |  |

Signature of Research Scholar

Certified that objectives of his work has been completed and student has published requisite no. of papers in quality journals as prescribed in Rules

Signature of Supervisor / Co-Supervisor

HOD ( )

Dean (Academics), SLIET, Longowal

 Page 1/1

**Performa-IX**

**EVALUATION REPORT ON THE SYNOPSIS SEMINAR FOR PH.D THESIS**

**Thesis Title (In capital letters):**

**Date & Venue of Seminar**

|  |  |  |
| --- | --- | --- |
|  | Name of the Research Scholar |  |
|  | Registration No. |  |
|  | Department |  |
|  | Date of confirmation of Ph.D. registration |  |
|  | **Recommendations :**(i) After evaluating the work presented by the Research Scholar \_\_\_\_\_\_\_\_\_\_\_\_\_\_, it is certified that the quality & volume of work is suitable for submission of Ph.D Thesis. It is also certified that candidate has published the quality work in accordance with Ph.D Regulations in force.(ii) If minor change in title and objectives recommended **(Yes/No)** |  |
|  | (i) If conditions at S.No. 5 (i) not fulfilled, kindly give your recommendations and remarks (ii) If condition at S.No. 5 (ii) is Yes, kindly list the new title and objectives  |  |

Signatures of the RPC/RAC Members with date

1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_4\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Recommendations of DRC

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| (DRC Member) | (DRC Member) | (DRC Member) | (DRC Member) | (Supervisors) |

Signatures of Chairperson, DRC with date

Dean (Academics)

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**Performa-IX-A**

**GUIDELINES FOR SYNPOSIS SUMMARY TO BE SUBMITTED WITH THESIS**

|  |  |  |
| --- | --- | --- |
| 1 | Introduction | 11 Arial or 12 Times New RomanDouble sided printUpto 15 pages |
| 2 | Brief literature review and problem formulation  |
| 3 | Methodology of research work in brief) |
| 4 | Result and Discussion |
| 5 | Author’s Contribution |
| 6 | List of publications |
| 7 | Bibliography in standard format | 09 pt Arial or 10 pt Times New Roman |

Signatures of Supervisor ( s) Signature of Candidate

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**Performa-IX-B**

 **THESIS FORMAT**

**Paper**

* + The size of the paper shall be standard A 4 (height 297 mm, width 210 mm), 90 GSM.
	+ **The thesis must be printed on both sides of white paper.**

**Font Size and Margins**:

* + The standard font of the text shall be Times New Roman of 12 or Arial 11 pts with 1.5 line spacing.
	+ Font size of Chapter, heading/ sub heading will be on the Authors discretion.
	+ The top, bottom and right side margins should be 25 mm, whereas the left side margin should be 35 mm for both textual and non-textual (e.g., figures, tables) pages, with mirror margin on even pages.

**Pagination:**

* + Pagination for pages before the Introduction chapter shall be in lower case Roman numerals, e.g., “iv”.
	+ Page numbering in the text of the thesis shall be Hindu-Arabic numerals at the centre of the footer.

**Paragraph format**:

* + Vertical space between paragraphs shall be about 2.5 line spacing.
	+ The first line of each paragraph should normally be indented by five characters or12mm.

**Bibliography**

* + Should be given preferably alphabetically or in the order of citations in the thesis

**Binding:**

* + The evaluation copies of the thesis may be spiral bound or soft bound (3 copies to be submitted to PG Section )
	+ The final hard bound copies to be submitted after the viva voce examination will be accepted during the submission of thesis with the Brown colour with golden color letter (3 copies to be submitted to PG Section )

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TABLE OF CONTENTS

|  |  |  |
| --- | --- | --- |
|  | TITLE PAGE (as per format given)**CERTIFICATE (as per format given)** |  |
|  | ABSTRACT ACKNOWLEDGEMENTSTABLE OF CONTENTSLIST OF FIGURESLIST OF TABLESLIST OF SYMBOLS AND ABBREVIATIONS | iv |
| 1 | INTRODUCTION | **1** |
| 1.1 | xxxxxxxx . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | 1 |
|  | 1.1.1 xxxxxxxx. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | 5 |
| 1.2 | . . . . . . . . . . . . . . . . .. . . . . . . . . . . . . . . . . . . . . . . 1.2.1 . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . 1.2.2 . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  1.2.2.1 . . . . . . . . . . . . . . . .. . . . . . . . . . . . . . . .  1.2.2.2 . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | 9 |
|  **Chapter 2** | . . . . .  |  |
| Chapter 3 | **. . . . . . . .** |  |
| **Chapter N** | **CONCLUSION AND FUTURE SCOPE** |  |
| N.1N.2N.3 | Conclusion . . . . . . . . . . . . . . . . . . . . . . . . . . . Author’s Contribution . . . . . . . . . . . . . . . . . . . . . . . Future Scope . . . . . . . . . . . . . . . . . . . . . . . . . .  |  |
|  |  |  |
|  | PUBLICATIONS FROM THE WORK |  |
|  | **BIBILIOGRAPHY** |  |
|  | **APPENDICES** page 2/5  **Ph.D THESIS TITLE** 16+ Bold & Single space **A THESIS** 12 + Bold***Submitted in partial fulfillment to the requirements***  ***for the award of the degree*** *12 italics +* *Bold & both line single space*  |   |

 *Of 12italics*

 **DOCTOR OF PHILOSOPHY** 12 + Bold

 *In 12 italics*

 **DEPARTMENT** 12 Bold

 *By 12 italics*

 **NAME OF CANDIDATE** 12 + Bold

(Regn. No.)



 1.75” by 1.75”

**SANT LONGOWAL INSTITUTE OF ENGINEERING & TECHNLOGY, LONGOWAL- (SANGRUR)**

 **Month, Year** 14+ Bold &

 single space

Page 3/5

**CANDIDATE’S DECLARATION**

It is certified that the work contained in the thesis entitled “**Title of Thesis”** is an original contribution by me and has not submitted in part or full for any other degree at this or other University.

The assistance and held received during the course of the thesis work have been acknowledged

**Signature\_\_\_\_\_\_\_\_**

**Name of Candidate\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Regn. No.\_\_\_\_\_\_\_\_\_\_\_\_\_**

I / we, the undersigned, supervisor (s ) ( Name, Regd. No.), candidate for the degree of Doctor of Philosophy, agree that the thesis entitled “ Title of the Thesis” , may be submitted in partial fulfillment of the requirements for the degree.

This is to certify that the above statement made by the candidate is correct to the best of my/ our knowledge .

Signature\_\_\_\_\_\_\_\_

Name of Supervisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature\_\_\_\_\_\_\_\_

Name of Co-Supervisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Month, Date**

The Ph.D viva voce Examination of Mr./ Ms.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Research Scholars, has been held on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Supervisors Signatures of External Examiner

Page 4/5

**STATEMENT OF THESIS PREPARATION**

1. Thesis title : “…………………………………………………….”
2. Degree for which thesis is submitted :”………………………….”
3. The thesis guide/ supervisor was referred to for the thesis preparation
4. Specifications regarding thesis format have been closely followed
5. The contents of the thesis have been organized according to the guidelines
6. The thesis has been prepared without resorting to plagiarism
7. All sources used have been cited appropriately
8. The thesis has not been submitted elsewhere for a degree

**Signature\_\_\_\_\_\_\_\_**

**Name of Candidate\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Regn. No.\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Department \_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Performa-X**

Department Dispatch No. \_\_\_\_\_\_\_ Dated\_\_\_\_\_\_\_\_\_\_ Department of \_\_\_\_\_\_\_\_\_\_\_\_

**PROFORMA FOR PANEL OF EXAMINERS FOR PH.D. THESIS EVALUATION**

The panel of following examiners is proposed for evaluation of Ph.D. Thesis:

|  |  |  |
| --- | --- | --- |
| **Candidate’s Name & Regn. No.** | **Thesis Title** | **Supervisor(s)** |
|  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
|   | **Examiners from India (Including IITs / NITs / IIMs / TIFR)** |  | **Examiners from Foreign (Preferably from Developed Countries)** |
| **Name & Designation** | **Department, Affiliation & Postal Address** | **Email ID & Phone No.** | **Name & Designation** | **Department, Affiliation & Postal Address** | **Email ID & Phone No.** |
| 1 |   |   |   | 1 |   |   |   |
| 2 |   |   |   | 2 |   |   |   |
| 3 |   |   |   | 3 |   |   |   |
| 4 |   |   |   | 4 |   |   |   |
| 5 |   |   |   | 5 |   |   |   |

Submitted for approval please.

|  |
| --- |
| **Undertaking :**The field of expertise of the proposed referees are in line with submitted research work by the scholar. Further verified that the above list of Examiners is as per Clause no. 7.2 of Ph.D. Rules & Regulations. |

 Name & Signature of DRC Members / Supervisor

HOD / Chairman DRC

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**Performa-XI**

**REPORT OF THE THESIS EXAMINER FOR THE AWARD OF PH.D DEGREE**

|  |  |  |
| --- | --- | --- |
| 1. | Name of Student |   |
| 2. | Father’s Name |   |
| 3. | Registration No. |   |
| 4. | Title of Thesis (in CAPITAL Letters) |   |
| 5.(a) | Date of Submission of Thesis (originally) |   |
| (b) | Revised submission (if applicable) |   |

**EXAMINER’S REPORT**

Check ( √ ) for your recommendations. Examiner may offer his/her remarks as per his/her recommendations made. Additional sheet may be used, if necessary.

|  |  |  |
| --- | --- | --- |
| **A.** | Thesis is recommended for award of Ph.D. Degree. |  |
| **B.** | i) The thesis be accepted after minor revision for the award of Ph.D. Degree and required to be sent for examination of responses before acceptance |  |
|  | ii) The thesis be accepted after minor revision for the award of Ph.D. Degree  and not be sent for examination of responses. |  |
| **C.** | The thesis be accepted after major revision requiring rewriting a portion / chapter of the thesis incorporating some additional work and the revised thesis shall be sent for examination of responses before acceptance for award of Ph.D Degree |  |
| **D.** | The thesis to be rejected. |  |

Signature of Examiner with date

Name of examiner:

Designation:

Address:

Page 1/1

**Performa-XII-A**

**Candidate’s Response to Examiners Comments**

|  |  |
| --- | --- |
| Thesis Title |  |
| Name of the Ph.D Scholar |  |
| Registration No. |  |
| Father’s Name |   |
| Name of Supervisor (s)  |  |
|  |

**Examiner-1**

|  |  |  |  |
| --- | --- | --- | --- |
| **S.No.** | **Comments of Examiner** | **Reply of candidate**  | **Correction in thesis****(Chapter/Section/Page no.)** |
| 1 |  |  |  |
| 2 |  |  |  |

**Examiner-2**

|  |  |  |  |
| --- | --- | --- | --- |
| **S.No.** | **Comments of Examiner** | **Reply of candidate**  | **Correction in thesis****(Chapter/Section/Page no.)** |
| 1 |  |  |  |
| 2 |  |  |  |

**Date & Signature of Supervisor (s) Date & Signature of Candidate**

 **Page 1/1**

**Performa-XII-B**

Dispatch No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Registration No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Candidate\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Father’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thesis Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of DRC meeting \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Recommendations of Departmental Research Committee (DRC)**

DRC examined the Examiners Report. All the suggestions / queries raised by the examiners have been addressed by the candidate in his response and necessary corrections have been incorporated in the revised thesis.

DRC recommends conduction of viva-voce examination of the candidate. Responses of the candidate and revised thesis is submitted for further necessary action

Name & Signature of Supervisor (s )

Name & Signature of DRC members :

|  |  |  |
| --- | --- | --- |
| **S. No.** | **Name & Designation** | **Signatures** |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| 5 |  |  |
| 6 |  |  |

HOD & Chairman DRC ( )

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**Performa-XII**

**REPORT OF THE VIVA-VOCE EXAMINATION BOARD FOR THE AWARD OF PH.D**

Thesis Title (in capital letters) :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date & Venue of Viva Voce Examination :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| 1. | Name of the Research Scholar |  |
| 2. | Father’s name  |  |
| 3. | Registration No. |  |
| 4. | Department |  |
| 5. | Name of Supervisor (s) with designation  |  |

**Evaluation Criteria:**

(to be filled by the Viva voce Examination Board members)

1. Examination of the Thesis Evaluation Reports:
2. Examination of necessary modifications suggested by the examiners and incorporation status:
3. Candidate’s reply to the questions raised by the examiners:
4. Authentication of the work as the student’s own:

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**Performa-XII**

**REPORT OF THE VIVA-VOCE EXAMINATION BOARD FOR THE AWARD OF PH.D**

1. Presentation of the work by the candidate and answers to the questions:
2. Recommendations of the Viva-Voce Examination Board :

**Names and Signatures of the Viva-Voce Examination Board Members:**

1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name & Signature of Chairperson,

 DRC, Deptt. of

\_\_\_\_\_\_\_\_\_\_

 SLIET, Longowal

Chairperson, CRC, SLIET

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**Performa-XIII**

 **STUDENT APPROVAL FORM**

|  |  |
| --- | --- |
| Name of the Author |  |
| Department |  |
| Degree |  |
| University |  |
| Guide |  |
| Thesis Title |  |
| Year of Award |  |

**Agreement**

1. I hereby certify that, if appropriate, I have obtained and attached hereto a written permission / statement from the owner(s) of each third party copyrighted matter to be included in my thesis/dissertation, allowing distribution as specified below.

1. I hereby grant to the university and its agents the non-exclusive license to archive and make accessible, under the conditions specified below, my thesis / dissertation, in whole or in part in all forms of media, now or hereafter known. I retain all other ownership rights to the copyright of the thesis / dissertation. I also retain the right to use in future works (such as articles or books) all or part of this thesis, dissertation, or project report.

**Conditions**:

|  |  |
| --- | --- |
| 1. Release the entire work for access worldwide
 |  |
| 1. Release the entire work for ‘My University’ only for

 1 year, 2 years, 3 years and after this time release the work for access worldwide. |  |
| 1. Release the entire work for ‘My University’ only, while at the same time releasing the following parts of the work (e.g. because other parts relate to publications) for worldwide access:
2. Bibliographic details and Synopsis only.

 b) Bibliographic details, synopsis and the following chapters only c) Preview / Table of Contents / 24 page only |  |
| 1. View Only (No Downloads) (world wide)
 |  |

Signature of the Scholar Signature and seal of the Guide

Place

Date

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**Performa-XIV**

**FORM FOR INCENTIVE FOR RESEARCH SCHOLARS**

**(SLIET QUALITY PUBLICATION AWARD ) (SQPA)**

|  |  |  |
| --- | --- | --- |
| 1 | Name and Registration of PhD scholar |  |
| 2 | Department |  |
| 3 | Registration no. |  |
| 4 | Date of Registration  |  |
| 5 | Supervisor (s) |  |
| 6 | Full Time / Part Time |  |
| 7 | Detail of mandatory two research papers published in web of science journals with impact factor 1 or above with documentary proof  |
| **S.No.** | **Author’s Name** | **Title** | **Journal Details** |
|  |  |  |  |
|  |  |  |  |
|  | Detail of Additional Research Paper Published in WEB of Science Journals with Impact Factor 1 or above with documentary proof  |
| **S.No.** | **Author’s Name** | **Title** | **Journal Details** |
|  |  |  |  |
|  |  |  |  |

Signature of Research Scholar

Recommendations of Supervisor ( s)

Recommendations of HOD concerned

Recommended for cash incentive of Rs.5000/-

 Dean (Academic)

DIRECTOR, SLIET

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**Performa-XV**

**REQUEST FOR PARTICIPATING IN NATIONAL/ INTERNATIONAL CONFERENCE/ SEMINAR / BY A RESEARCH SCHOLAR FOR PAPER PRESENTATION**

|  |  |
| --- | --- |
| 1. Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 2. Regd. No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 3. Programme: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 4. Category (Full Time/ Part Time):  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 5. Major Discipline: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 6. Date of joining: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 7. In case of Full Time ( with/ without  fellowship): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 8. Department  |  |
| 9. Course work completed: Yes/ No |  |
| 10. Amount of fellowship and source: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 11. Name of Supervisor(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 12. Name of the Conference/Seminar to be attended: |
| 13. Period of the conference/ seminar: | 14. Venue (city/state) of the  conference/ seminar:  |
| 15. Registration fee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 16. Other expenditure (TA):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 17. Financial assistance from any other institute/ agency for the above conference/ seminar to be attended: |
| 18. Whether personally presenting a research paper: Yes/ No1. If yes, whether the paper has been accepted for presentation at the meeting: Yes/ No
2. Full paper along with an abstract attached: Yes/ No
3. Letter of acceptance from the organizers for Oral/ Poster Presentation attached: Yes/ No
 |
| 19. Details of **previous or already attended** conference/ seminar (including name of the event, duration,  date, organizer etc.):  |
| 20. Whether the **previous or already attended** conference/ seminar was funded by SLIET ? If Yes, mention the name / serial no. of the Conference / Seminar |
| 21. Enclosure (proof of invitation/ acceptance from organizers): |
| Page-1/2**Performa-XV****REQUEST FOR PARTICIPATING IN NATIONAL/ INTERNATIONAL CONFERENCE/ SEMINAR / BY A RESEARCH SCHOLAR FOR PAPER PRESENTATION** |
| 2. All the above information is to the best of my knowledge |
|  | STUDENT’S SIGNATURE (WITH DATE) |
| 23. Recommendations of the supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| SUPERVISOR(SIGNATURE WITH DATE) |
| **24. Recommendations of the DRC concerned and Chairman, DRC as per** **Rule : 10.6 of Ph.D** **Regulations -2018**  **amended in CRC meeting 09.01.2019 and ratified in 23rd  Senate Meeting** **dated 15.01.2019**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------ |
| SIGNATURE (WITH DATE) DRC MEMBERS CONCERNED AND CHAIRMAN, DRCDEPARTMENT OF \_\_\_\_\_\_\_\_\_\_\_ |
| 25. Remarks/ Recommendations of Dean Academics :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DEAN (ACADEMICS) |
| DIRECTOR, SLIET |

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**Performa-XVI**

**REPORT OF THE REVIEW COMMITTEE MEMBERS FOR EXTENSION OF TIME PERIOD FOR COMPLETION OF PH.D TO PART TIME SCHOLARS AFTER EXPIRY OF 07 YEARS**

Report of the Review Committee Members for conducting presentation, making assessment and recommendations of the work being done by Part Time Research Scholar who have completed \_\_\_\_\_\_\_\_\_\_ quarter of extended 08th years (After expiry of 07 years) for extension of time for completion of Ph.D.

|  |  |
| --- | --- |
| Time, Date and venue of Presentation  |   |
| Name of Research Scholar, Registration No. |   |
| Department  |   |
| Date of Registration and 07 years of registration completed on and last extension upto  | **Date of Registration** | **Date of completion of 07 years** | **Last extension upto**  |
|  |  |  |
| Findings of the Review Committee member |  |
| Recommendations |  |
| Suggestions (if any) |  |

|  |  |  |
| --- | --- | --- |
| Signatures of Chairman-DRC-ConvenerSignatures ofHOD ( )  | Name and Signatures of External Member(Professor from Other Department of SLIET ) | Name and Signature of Concerned Supervisor ( s ) |

Dean (Academics )

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 **Performa-XVII**

**BILL FOR PAYMENT OF FELLOWSHIP TO THE FULL TIME RESEARCH SCHOLARS OF DEPARTMENT OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_FOR THE MONTH OF \_\_\_\_\_\_\_\_\_, YEAR\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Sr. No.** | **Name of Research Scholar** | **Registration No.** | **Date of joining**  | **Expiry Date of Fellowship** | **No. of days remained in the department (including CL / authorized O.D. )** | **Detail of C.Ls availed during the month (maximum 08 in a calendar year)** | **No. of absents during the month due to medical leave/absent or leave due to any other reasons, whose fellowship is not to be paid** | **Amount of Fellowship to be paid for \_\_\_\_ days after deduction of fellowship of \_\_ days mentioned in column No. 10** | **Preparation of Bill by the office/ Department clerk/ JSS on the basis of attendance register, being maintained by Deptt.** | **Verification of teaching load by concerned faculty / HOD**  | **Verification by concerned guide with date**  |
| **Balance before availing** | **Consumed during month** | **Balance after availing** |
| **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **13** | **14** |
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1. Certified that the above particulars are correct as per original record of the concerned fellow, maintained in the department.
2. Fellowship of above mentioned Research scholars is recommended for release as per Column No. 11 of above table, duly verified by the guide/supervisor.

 Stamp and Sign of HOD with date

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Department

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