Ph.D. THESIS – SYNOPSIS SEMINAR

Part-A: To be filled by the Student *(before the Synopsis Seminar) & duly forwarded by Supervisor(s)*

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| --- | --- | --- | --- |
| 1. | Name of the Student | : |  |
| 2. | Roll Number | : |  |
| 3. | Academic Division | : |  |
| 4. | Present Type/Category of the Student:Put a Tick mark ✓ | Full Time |  | Part Time |
|  |  |  |  |
|  |  |
|  | Regular |  | Sponsored |  | Self-Financed |  | Project-Staff |  | External |  | QIP/Other |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |
| 5. | Name(s) of Supervisor(s): |  |
| 6. | Type of Financial Assistantship, if the student is receiving presently | Institute / GATE |  Others (specify): |
| 7. | Ph.D. Thesis Title: |
| 8. | From the Ph.D. Thesis Work, the Number of Research Articles/ Papers:(Enclose the list) | Published in Refereed | Submitted/ Accepted for Publication in Refereed |
| Conferences | Journals | Conferences | Journals |
|  |  |  |  |
| 9. | Have you submitted Synopsis of Ph.D. Thesis to DC? (Synopsis is to be submitted to DC one week before the date of synopsis seminar) Yes / No |
|  | I will submit my PhD thesis within 3 months from the date of Synopsis Seminar/ Approval of Synopsis by the DC.Date: Signature of the Student |
|  | Forwarded to the Doctoral CommitteeDate: Signature(s) of Supervisor(s) |
|  | *The Doctoral Committee is requested to write their assessment on Synopsis Seminar on Page No.2* |

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Part-B: To be filled by the Doctoral Committee *(After the Synopsis Seminar)*

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| --- | --- | --- | --- |
| 1. | Name of the Student | : |  |
| 2. | Roll Number | : |  |
| 3. | Date of Synopsis Seminar | : |  |
| 4. | Brief comments on Ph.D. Thesis Work carried out by the Student: (If the space is not sufficient, please write it in a separate sheet & attach) |
| 5. | Ph.D. Thesis Work carried out by the Student: |  Satisfactory / Not Satisfactory |
| 6. | The Doctoral Committee has gone through the Synopsis of Ph.D. Thesis submitted by the Student and makes the following recommendations: (Put a tick mark ✓ in the appropriate boxes) |
|  |  | Synopsis of Thesis is approved and permission is granted to submit it  |  |  | Synopsis of Thesis is NOT approved. Suggestions are given to improve thesis work and revise Synopsis of Thesis accordingly. Student should present another Synopsis Seminar within …………..months. |
|  | (Please enclose a copy of the Synopsis of Thesis duly approved by the DC) |
|  | Name & Signature of Doctoral Committee Members: |
| Signature |  |  |  |
| Name | Member | Member |  |
| Signature |  |  |  |
| Name | Coordinating Supervisor | Supervisor | Chairperson, DC |
|  |  |  |  |
|  | Member Secretary, DPPC |  | Chairperson, DPPC |
| Remark, if any: Put up for approval.Date: Dealing Staff of Academic Research Section | ApprovedADoAR/DoAR |

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