REPORT ON THE STATE-OF-THE-ART SEMINAR

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

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. | Name of the Student | | | : | |  | | | | | | | | | | | | | | |
| 2. | Roll Number | | | : | |  | | | | | | | | | | | | | | |
| 3. | Academic Division | | | : | |  | | | | | | | | | | | | | | |
| 4. | Name(s) of Supervisor(s): | | |  | | | | | | | | | | | | | | | | |
| 5. | Date of Successful Completion of Comprehensive Examination: | | | | | | | | | | | |  | | | | | | | |
| 6. | Number of Semesters already Completed in the PhD Programme: | | | | | | | | | | | | |  | | | | | | |
| 7. | 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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|  |  | | | | | | | | | | | | | | | | | | | |
| 8. | Type of Financial Assistantship, if the student is receiving presently | | | | | | : | Institute/ GATE | | | Others (specify): | | | | | | | | | |
| 9. | Date of the State-of-the-Art Seminar | | | | | | : |  | | | | | | | | | | | | |
| 10. | Area / Topic of Research | | | | | | : |  | | | | | | | | | | | | |
| 11. | Literature Review/ Survey | | | | | | : | Done / Not Done | | | | | | | | | | | | |
| 12. | Research Problem Formulated | | | | | | : | Yes / No | | | | | | | | | | | | |
|  | If Yes, enclose a brief description of the formulated research problem.  If No, state the reasons. | | | | | | | | | | | | | | | | | | | |
|  | Date: Signature of the Student | | | | | | | | | | | | | | | | | | | |
|  | Forwarded to the Doctoral Committee  Date: Signature(s) of Supervisor(s) | | | | | | | | | | | | | | | | | | | |
|  | *The Doctoral Committee is requested to write their assessment on the State-of-the-Art Seminar on Page No.2* | | | | | | | | | | | | | | | | | | | |

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

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. | Name of the Student | | : |  | | | | | | |
| 2. | Roll Number | | : |  | | | | | | |
| 3. | Date of the State-of-the-Art Seminar | | | | : | |  | | | |
| 4. | Area / Topic of Research | | | | : | |  | | | |
| 5. | Literature Review/ Survey | | | | : | | Satisfactory / Not Satisfactory | | | |
| 6. | Research Problem Formulated | | | | : | | Yes / No | | | |
| 7. | Brief comments on the Student’s Performance in the State-of-the-Art Seminar: (if space is not sufficient, please write it on a separate sheet & attach) | | | | | | | | | |
| 8. | Overall Performance of the Student in the State-of-the-Art Seminar: | | | | | | | | Satisfactory / Not Satisfactory\* | |
|  | Note: If the overall performance is not satisfactory, then the student has to present SOAS again within a month. | | | | | | | | | |
|  | 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 | | | | | | | | Approved  ADoAR/DoAR | | |

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