

Seeking Extension to Continue in the PhD Program

Part-A: To be filled by the Ph.D. Student

| | | | | | |
|--|--|------------|---|---------------|----------|
| 1. Name of the Ph.D. Student | | | | | |
| 2. Roll Number | | | | | |
| 3. Academic Division | | | | | |
| 4. Name(s) of Supervisor(s): | | | | | |
| 5. Month and Year of First Registration/ Joining of Ph.D. Program: | | | | | |
| 6. Date of Successful Completion of State-of-the Art Seminar: | | | | | |
| 7. Number of Semesters already Completed in the Ph.D. Program: | | | | | |
| 8. Present Type/Category of the Student: Put a Tick mark ✓ | Full Time | | Part Time | | |
| | Regular | Sponsored | Self-Financed | Project-Staff | External |
| | | | | | |
| 9. Area / Topic of Ph.D. Thesis Research Work | | | | | |
| 10. Current Status of Ph.D. Thesis Research Work (in total / so far) | Completed Work is% (Write in Percentage) | | | | |
| 11. Expected month and year for Ph.D. Thesis Submission | | | | | |
| 12. From the Ph.D. Thesis Research Work, the Number of Research Articles/ Papers: | Published in Refereed | | Accepted/ Submitted for Publication in Refereed | | |
| | Journal | Conference | Journal | Reference | |
| | | | | | |
| 13. Reasons for Not Completing Ph.D. Thesis Research Work even after crossing the maximum duration of the PhD program: | | | | | |

(Page 1 of 2) Continued on the next page (See Sl. No. 14 and fill)

14. Brief Details about Remaining Ph.D. Thesis Research Work that is to be completed (Along with Time Line for completion): It the space is not sufficient, please write it on a separate sheet & attach

Note: After filling this form all required details in Page 1 and 2, the PhD students should submit it to the Thesis Supervisors. Thesis Supervisors and Chairperson, DC are kindly requested to forward it after writing their comments/ recommendations.

I request you to kindly grantmonths (maximum 4 months) or **one semester extension** (till July 15, 2019) to complete my Ph.D. thesis research work and submit the thesis. Also kindly grant me permission for registering the **Winter Semester (January-May 2019) of the Academic Year 2018-2019** and continue in the PhD program in that semester.

Date:

Signature of the Ph.D. Student

Part-B: To be filled by Thesis Supervisor(s), Chairperson-DC and DPPC, etc

Brief comments and recommendations on the extension request of the PhD student by the Thesis Supervisors:

☐ Recommended / ☐ Not Recommended

Thesis Supervisor(s)

Chairperson, DC

Remark, if any:

☐ Recommended / ☐ Not Recommended

Member Secretary, DPPC

Chairperson, DPPC

☐ Recommended/ ☐ Not Recommended for approval

☐ Approved / ☐ Not Approved

Date:

ADoAR/DoAR

Date:

Chairperson, Senate

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