

ANNUAL ACADEMIC PROGRESS REVIEW REPORT

Part-A: To be filled by the Student (before the Annual Academic Progress Review Seminar) & duly forwarded by Supervisor(s)

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
5. Name(s) of Supervisor(s):					
6. Date of Successful Completion of the State-of-the-Art Seminar:					
7. Date of Last Annual Academic Progress Review Seminar:					
8. Type of Financial Assistantship, if the student is receiving presently	Institute / GATE	Others (specify):			
9. Total Number of Semesters Completed in the PhD programme:					
10. Assessment Period of Academic Progress:	From:	To:			
	Month & Year	Month & Year			
11. During the Assessment Period, Number of Seminars/ Conferences / Workshop attended: (Enclose the list and attach supporting documents)					
12. During the Assessment Period, Number of Research Articles Published / Submitted for Publication from the PhD Research Work undertaken (Enclose the list):					
13. For this Annual Progress Seminar, Have you submitted a brief report to DC on the research work carried out by you during the assessment period? Yes / No	(Enclose a copy to give it to the DC. Not required for the Academic Section)				

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 Academic Progress of the Student on Page No.2

Part-B: To be filled by the Doctoral Committee (After the Annual Academic Progress Review Seminar)

1.	Name of the Student	:	
2.	Roll Number	:	
3.	Assessment Period of Academic Progress:	From: Month & Year	To: Month & Year
4.	Date of Annual Academic Progress Review Seminar	:	
5.	Brief comments on the Academic Progress of the Student during Assessment Period: (If the space is not sufficient, please write it in a separate sheet & attach)		

6.	Overall Academic Progress during the Assessment Period:	Satisfactory / Unsatisfactory
7.	Recommendation of DC (Put a tick mark ✓ in the appropriate box)	
	<input type="checkbox"/>	The Studentship may be continued

Name & Signature of Doctoral Committee Members:

Signature			
Name	Member	Member	Member
Signature			
Name	Coordinating Supervisor	Supervisor	Chairperson, DC

Member Secretary, DPPC

Chairperson, DPPC

Remark, if any:	Put up for approval.	Approved
Date:	Dealing Staff of Academic Research Section	ADoAR/DoAR

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Note: This form is to be submitted by the DC within 3 working days from the date of Annual Academic Progress Review Seminar. After signature of the ADoAR/DoAR, the original is to be kept in the personal file of the student in the Academic Research Section and a photocopy / scanned copy is to be sent to the Supervisor(s) and to the Chairperson, DPPC.