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| Ph.D. Research Scholar Name & University Register Number  |  |
| School & Department  |  |
| Contact Number |  |
| E-mail id  |  |
| Year of Ph.D. Registration  |  |
| Registration Mode | Full-Time / Part-time  |
| Research Supervisor Name  |  |
| Co- Supervisor Name, if applicable |  |
| Name of the HOD/Dean of the department  |  |
| Internal Doctoral Committee Member Name  |  |
| External Doctoral Committee Member Name  |  |

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| S.No | Year | Month  | Ph.D. Programme WorkTitle  | Description  | Remarks  |
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Research Supervisor Co-Supervisor

(Signature & Date) (Signature & Date)

Ph.D. Research Scholar

(Signature& Date)

Recommended for Submission and Forwarded

HOD/Dean of the Department

(Signature & Date)

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For Ph.D. Programme Office Use Only

Review of the Research Calendar: Reviewed/ Not Reviewed

Follow-up Action (If any):

Follow-up Action (Status):

Note:

1. This form shall be typed and printed. Only the signature and date should be handwritten.
2. The format should not be altered. Any alteration in the format will not be accepted.
3. Times New Roman font, size 11pt., and unbold text should be used.