**FORM IV-D**



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**NATIONAL INSTITUTE OF TECHNOLOGY MEGHALAYA**

**बिजनी कॉम्‍पलेक्‍स, लैटमुख्‍्राह, शिलांग Bijni Complex, Laitumkhrah, Shillong-793003**

#####  **PhD** **Progress Seminar Report**

*(For all PhD scholars who have completed PhD Registration. This form is to be submitted at least once a year at the end of Spring Semester )*

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| --- | --- |
| **1** | Date of Progress Seminar:\_\_\_\_\_\_\_\_\_\_\_\_ Period from\_\_\_\_\_\_\_\_\_\_\_ to\_\_\_\_\_\_\_\_\_\_\_ |
| **2** | Name of Scholar\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **3** | Roll no \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **4.** Department\_**\_\_\_\_\_\_** | **5.**Category (Please tick): Full time/ Sponsored (Part Time)/ Project Fellow |
| **6** | Date of Admission \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **7.** Date of Registration\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **8** | (a) Name of Supervisor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **9** | (b) Name of Co-Supervisor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Affiliation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **10** | Total no. of semesters completed: |
| **12** | Total no. of course work completed and credits earned: |
| **13** | Area of research: |
| **14** | Progress of research (Report must be attached) |
| **15** | Expected date of completion: |
| **16** | Leave availed during this semester (if applicable): |
| **17** | Nature of Fellowship/Scholarship/Stipend received, if any: |

Signature of the scholar

**Recommendation of the Doctoral Committee (Please tick any one of the following):**

🞏 Allowed to enroll in the next semester and continue research.

🞏 Allowed to enroll and continue research but with suggestions for improvement.

🞏 As the performance is very poor, advised to discontinue.

Signature of D.C. Members:

1. Chairman………………………. 2. (Member)………………………… 3. (Member) ………………………………

4. (Member)……………………… 5. Co-supervisor ………………………. 6. Supervisor …………………

Signature of DRC Chairman

Date:

Forwarded to Dean(AA)