

Proforma for Half-yearly Review of PMRF Ph.D. Candidates

Name of the PMRF Ph.D. Candidate:

Department: **S. R. No:**

Research Topic:

Date of Admission into the Ph.D. Program:

Date of PMRF Scholarship Awarding:

Review Date: January/July _____, 20_____

Previous Review Date: January/July _____, 20_____

Progress of the PMRF Ph.D. Candidate (use separate sheets if needed):

Research Training Program (RTP) [Applicable to first year Ph.D. students]:

Research Work:

Overall progress (tick one): Not Satisfactory/Satisfactory/Good/Very Good/Excellent
(in case the option chosen is 'Not Satisfactory', please provide detailed comments in a separate sheet)

Signature
Chair of the Department or his/her nominee
Name:

Signature
Review Committee Member
Name:

Signature
Review Committee Member
Name:

Signature(s)
Research Advisor(s)
Name(s):