Indian Institute of Technology Indore

Application for Continuation of PhD Program Beyond Five Years

Name: Mr. / Ms. _____

Roll No.: _____ Discipline: _____

Admission Category (TA/FA/DF/SW/IS/CT): _____

If FA, then name of funding agency/ Project no.: _____

Date of joining the program: _____

Date of registration to the program: _____

Date of confirmation to the program: _____

Theme of Research work/ Thesis Title: _____

_____

_____

Date of latest Comprehensive Evaluation of Research Progress (CERP): _____

Date of registration of last semester: _____

Previous continuation(s), if any, granted upto: 1. _____

2. _____

3. _____

Period of continuation required for thesis submission: _____

Reasons for continuation request (if on medical basis then, attach certificate): _____

_____

_____

_____

_____

_____

Details of Publication and Patents (attach separate sheet giving details as appropriate):

Number of papers published in refereed journals: _____

Number of papers published in refereed conference proceedings: _____

Number of book chapters: _____

Number of papers under review (journal + conference): _____

Details of patent(s) and/or application(s), if any: _____

Signature of Student (with date): _____

Item	Recommendations, Remarks, Observations (please use extra sheet, if required)
A. Recommendations/ Remarks by Thesis Supervisor(s)	
A1. Work completed till now	
A2. Proposed schedule of work that remains to be completed with clear time lines specified	
A3. Expected date for PhD thesis submission	
A4. Recommended or not for continuation of the program beyond five years	
A5. Name and signature of thesis supervisor(s) with date	Thesis Supervisor(1) Thesis Supervisor(2)
B. Recommendations/ Remarks by PSPC members	
B1. Remarks/ Recommendations/ Observations by the PSPC members	
B2. Name and signature of PSPC members with date and their Discipline name	PSPC Member(1) PSPC Member(2) PSPC Member(3)
C. Remarks/ Recommendations/ Observations by Convener, DPGC	
D. Remarks/ Recommendations/ Observations by the HOD (or HOSH for HSS)	
E. Remarks/ Recommendations/ Observations by Dean, Academic Affairs	

Approval by Chairman, Senate:

Signature with date