

RESEARCH PROPOSAL EVALUATION
RESEARCH ADVISORY COMMITTEE (RAC)

Date:

1. **Department** :
2. **Research Scholar** :
3. **Registration Number** : **Reg. Date**.....
4. **Thesis Title** :
5. **Supervisor Name** :
6. **Co-Supervisor Name (If any)** :
7. **Type of Registration** : Full-time Part time Internal Part time External
8. **Proposed Title** :

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9. **Proposed Objectives** :
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10. **RAC Recommendations** : Recommended to DRC Not Recommended

S. No.	RAC Member	Signature with Date
1.		
2.		
3.		
4.		

**RESEARCH PROPOSAL EVALUATION
DEPARTMENTAL RESEARCH COMMITTEE (DRC)**

Date:

1. Department :
2. Research Scholar :
3. Registration Number : **Reg. Date**.....
4. Thesis Title :
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6. Co-Supervisor Name (If any) :
7. Type of Registration : Full-time Part time Internal Part time External
8. DRC Recommendations:

(i) Title :

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(ii) Objectives :

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The above-mentioned title and objectives are approved for the Ph.D. thesis.

YES NO

(iii) Comments (If not recommended)

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S. No.	DRC Member	Signature with Date
1.		
2.		
3.		
4.		
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6.		