

INDIAN INSTITUTE OF INFORMATION TECHNOLOGY ALLAHABAD

Recommendation of the Doctoral Committee for Annual continuation of SRF emoluments

(applicable to all existing Research Scholars)

Valid from 08.02.2021

Date of Meeting: ___/___/___ **Time of Meeting:** _____ **Venue of Meeting:** _____

Sr. No.	Description	Details
1.	Name of the Student:	
2.	Enrollment No. of the Student:	
3.	Name of the Supervisor(s) : (explicitly mention the role of each supervisor)	
4.	Name of the Department:	
5.	Date of Joining in Ph.D.:	
6.	Current Semester:	
7.	Topic of Research:	
8.	Period of monthly report:	

Doctoral Committee:

The above said student has presented his achievements and future plans (Annexure –A). The detailed comments of the Doctoral Committee are placed at Annexure –B.

Accordingly it is recommended that monthly report for continuation of SRF emoluments is **satisfactory/ unsatisfactory.** (Strike out whichever is not applicable)

Sr. No.	Description	Name	Signature
1.	Supervisor (ex-officio Chairperson)		
2.	Supervisor-II/ Co-Supervisor (if required by the supervisor) / Administrative Guide		
3.	An Expert from within the Department		
4.	An External Expert		
5.	HOD or his nominee		
6.	Dean (A&R) or his nominee		

Received & Verified by R&D Section Staff: _____

**Comment from
Associate Dean (R&D)**

Approved

Chairman, Senate