



Indian Institute of Information Technology Allahabad

An Institute of National Importance by Act of Parliament

REQUEST FOR EXTENSION OF FINANCIAL ASSISTANTSHIP

(To be filled by PhD students admitted from July-2018 for Continuity for their Fellowship in 5th Year)

Date _____

Name of Student: _____ Enroll. No. _____ Department: _____ (AS/ECE/IT/MS)

DoR/J _____ Current SemesterNo. _____ Programme: _____ (Ph.D/M.Tech-Ph.D/MBA-Ph.D)

CGPI TILL LAST SEMESTER _____ Name of Supervisor (1) _____

Supervisor (2) (If applicable) _____

Details of Semester(s) Leave (If obtained): _____

Extension is requested for **6 Months/ 12 Months** for **Semester No. 9th/ 9th & 10th** (Strike off whichever is not applicable)

Signature of The Student

Enclosures required (From students with signature : Annexure A, B, C):

1. **Attach “Annexure - A”** - A note giving reasons for non-completion of the program within the 4 years, since the minimum duration to complete the PhD program is 3 Years as per Ordinance 2018. The reasons should be specific and in detail.
2. **Attach “Annexure - B”** - A list of achievements (publications, patents, anything else), and highlight those which have been achieved in the previous semester.
3. **Attach “Annexure - C”** - The overall status of your thesis and the likely schedule for its completion. The schedule should be detailed, and should include (as applicable) expected dates for completion of experimental work, starting to write thesis, submitting first draft to supervisor, open seminar, submission of synopsis, formal submission of thesis, etc. If you are required to submit a Peer Group Review Report, then please ask them to write their comments on this sheet.
4. **Attach “Annexure - D”** - Recommendation of Supervisor(s) & HoD in view of Annexure - A, B & C
5. **Attach “Annexure - E”** - Recommendation of Doctoral Committee in view of Annexure - A, B, C & D

(For use in the office of Research & Development Section)

Remarks of R&D Section -

A. Recommended/Not Recommended for the period

A. Dean (R&D)

Approved / Not Approved for the period

Chairman Senate

(This portion to be filled by Thesis Supervisor)

Please use a separate sheet, if necessary

1. Please give your comment on the reasons given by the student for non-completion of the PhD program in 4 years (Since the normal minimum duration to complete the PhD program is 3 years as per Ordinance 2018).....

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2. Please give your comment on the schedule given by the student for the remaining work till thesis submission.....

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3. Financial Assistantship extension **Recommended / Not Recommended.**

Dated:

(Signature of Supervisor(s))

(This portion to be filled by Head of Department)

Please schedule a meeting with the PhD student, and based on your understanding of the reasons for delay, his/her performance so far, and the comments of the thesis supervisor, please provide a specific recommendation, including reasons for your recommendation.

Date of meeting the student:

Recommendation (Use a separate sheet, if necessary, please do sign it):.....

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Dated:

(Signature of Head of Department)

(This portion to be filled in by Doctoral Committee)

1. Members of the Doctoral Committee: (1).....
(2).....(3).....
(4).....(5).....
(6).....(7).....

2. Work done in the last semester, present status of the thesis, and schedule for completion of thesis. (Student has been asked to prepare a sheet. Please give your comments about that sheet.)

3. Bottlenecks and Difficulties which need attention.

4. Suggestion, if any, to speed up the progress:

5. Recommendations

Progress made in previous semester: *Excellent / Good / Satisfactory / Inadequate / Poor*

Quality of work done so far: *Excellent / Good / Satisfactory / Inadequate / Poor*

Overall Recommendation for Extension of Assistantship: *Strong yes / Yes / No / Strong No*

(If you are recommending extension despite inadequate/poor rating in first two, or not recommending despite excellent/good rating in the first two, please attach an explanation.)

Signature of Members of Doctoral Committee

A. Dean(R&D)