

**Part C : To be filled in by the RPC members
(Section I – Report on Current APS)**

[Copy of this report alongwith PART A & B has to be given to the student. Original to be forwarded to academic office]

Date of APS : _____	Name & Roll no. of Student: _____
The report is for [Please tick (✓) appropriately]: _____REGULAR _____REPEAT _____BIENNIAL APS.	

1. **Progress of the Ph.D. :** SATISFACTORY / UNSATISFACTORY
2. **Quality of work done :** EXCELLENT / GOOD / SATISFACTORY / UNSATISFACTORY
3. **Quantity of work done :** ENOUGH / JUST SUFFICIENT / INSUFFICIENT
4. If marked “Unsatisfactory/Insufficient” at 1, 2 or 3 above, the **student should give APS again after** _____ **months.** [Refer Rule 8.2.5. **Repeat APS to be given between 3 to 6 months.** Student may have to leave the programme, if he/she gives 2 consecutive poor performances in APS, including the repeat APS.]
5. **Additional Comments, if any** (attach additional sheets if necessary): (If the current APS is not marked as “poor performance”, but the RPC feels that the student should repeat the APS, such repeat presentation shall be an internal matter and the report of such repeat presentation need not be sent to academic office. The current APS will be recorded in ADMS.)

6. **Recommended enhancement of Assistantship* :** YES / NO
7. **Expected period for completion of programme:** 1 year / 2 years / 3 years / 4 years.

Part D : To be filled in by the Faculty Advisor/Nominee of HoD

If the student has not completed the mandatory course credits / department qualifier within the specified period due to unavoidable situation, first year APS report still needs to be submitted. In such cases, the report can be signed by the **Faculty Advisor/Supervisor/Nominee appointed by HoD** and submitted through DPGC.

Remarks of Faculty Advisor : _____

Signature of Faculty Advisor/Nominee of HoD with date: _____ Name: (Prof. _____)

**(Applicable if the student has filled PARTB. Strikeoff, if not applicable.)
(Section II – Recommendations for extension of registration, after reviewing student’s request at PartB)
{Note: A separate form for extension is not required.}**

Noted that the student has requested extension till : _____.

8. a) **Recommend extension** of Ph.D. registration up to : _____.

OR

b) **Not recommend extension** of Ph.D. registration. The student has to sum-up the research work and submit the thesis by _____. If student does not submit the thesis by this date, he/she should be asked to leave the programme with **Exit degree / Without exit degree.**

Signature with date: _____

Name: (Prof. _____) (Prof. _____)
Examiner 1 (RPC) Examiner 2 (RPC)

Signature with date: _____

Name: (Prof. _____) (Prof. _____)
Co-Supervisor Supervisor

Through Convener, DPGC / IDPC / PGC _____

(Signature with date & Stamp)

Academic office

Date : _____

Remarks of Convener PGAPEC: Extension approved till _____ / Not Applicable.

Signature of Convener PGAPEC:

* **Pls. note that student is eligible for enhancement of assistantship/fellowship (TA,RA, CSIR,UGC)** [Refer Ph.D. Rule R.10.3] :
(a) **w.e.f. the date of completion of 2 years** (in case APS is presented within the approved schedule and on successful APS).
(b) **w.e.f. the date of successful APS**, (in case successful APS being delayed/repeated beyond the senate approved schedule). (For APS schedule, refer to <http://www.iitb.ac.in/newacadhome/toacadcalender.jsp>).