

# UNIVERSITY OF DELHI SOUTH CAMPUS

Faculty of Interdisciplinary and Applied Sciences

Board of Research Studies

## PROFORMA FOR CONFIRMATION OF Ph.D. REGISTRATION

1. Name of the Student : \_\_\_\_\_
2. Department : \_\_\_\_\_
3. Date of Registration : \_\_\_\_\_
4. Subject of research : \_\_\_\_\_
5. Name of the Supervisor : \_\_\_\_\_
6. Period of the Progress Report : From \_\_\_\_\_ To \_\_\_\_\_
- 7 (a) Has the candidate successfully completed  
The minimum two courses or more as prescribed by the DRC? : Yes / No
- (b) Whether a copy of the result is enclosed : Yes / No
8. Whether progress report is enclosed (*mandatory*)
9. Remarks by the Advisory Committee members
10. Names and signatures of Advisory Committee Members  
i. \_\_\_\_\_ iii. \_\_\_\_\_  
ii. \_\_\_\_\_ iv. \_\_\_\_\_
11. Remarks by the Head of the Department with signature