



**UNIVERSITY COLLEGE OF ENGINEERING & TECHNOLOGY
ACHARYA NAGARJUNA UNIVERSITY
Nagarjuna Nagar – 522510, (A.P.) INDIA**



RESEARCH SCHOLAR’S PROGRESS REPORT – REVIEW FORM

Date of 3rd RRM: / April -May/ 2018.

1) Name of candidate:

2) A) Present Official Address:

B) Address for Communication:

E-mail:
Tel: (O): (R): (M)

3) Degree Registered: Ph.D. Full Time / Part Time **(Tick the program)**

4) Faculty/ Department with which registration is made: **(Tick the appropriate faculty)**

5) Year of Registration: _____ Admn./H.T.No.: _____

6) Name of the Supervisor with Contact Address and E-mail:

| | |
|----------|--------------|
| Name: | Designation: |
| Address: | |
| | |
| Email: | Phone: |

7) Title of Research Work (as registered, at the time of admission):

8) Is there any **change of Topic** or **Change of Supervisor (s)**? (YES/ NO)

If so, give details on separate sheet, attaching the copy of the letter for such permission(s)
(ENCLOSED/NOT ENCLOSED)

9) Details of subjects selected for the pre Ph D Examination:

| S.No | Subj. Code | Title of the Subject | Status/year of Completion |
|------|------------|----------------------|---------------------------|
| 1. | | | |
| 2. | | | |

10. Status of work of the Research Work and Progress:

A) Literature Survey:

- % covered so far: _____
- No,Of Technical Papers Referred
- (Relevant to the topic): _____
- List of Referred Technical Papers (With Journal Name , Vol.No.,Issue No., /Month of Publication , Page Nos. etc) to be shown (Yes/No)
- Remarks: _____

B) Type of Research Work & Progress:

- EXPERIMENTAL WORK /THEORETICAL STUDY/
SIMULATION/SYNTHESIS/OR ANY OTHER VARIATION
- (Tick mark one or mention if combinations are considered)
- % of work completed so far: _____
- Remarks: _____

**C) No. of Technical Publications (relevant to research Topic): _____
(Publications should contain Research Scholars Contribution alone, after Date of
Registration for Ph.D)**

D) Expected Time of Completion:

*Within 6 months

*Within one year

*More than a year

(Tick mark one or Add your Requirement)

E) Number of RRM's Attended so far: _____

Date:

Signature of the candidate

F) CERTIFICATION by the supervisor(s):

- 1) It is here by certified that the INFORMATION, and DETAILS presented above are true to the best of our knowledge.
- 2) The performance and progress of research work of the scholar are **SATISFACTORY / NOT SATISFACTORY**

**Signature of the Supervisor
with Date and Seal**

Note:

1. The research scholar should submit the above report to the research review committee on the day of RRM, for their endorsement and comments ,and further onward transmission to the R&D.,
2. All Research scholars are requested to make their own arrangements for boarding and lodging during the above period. Scholars are advised to stay one more day, if required.
