



HINDUSTAN

INSTITUTE OF TECHNOLOGY & SCIENCE
(DEEMED TO BE UNIVERSITY)

DIRECTORATE OF RESEARCH & CONSULTANCY

PROFORMA FOR REQUISITION OF Ph.D. EXTENSION

Name of the Scholar: Email ID (Official Institution):	Name of the Supervisor: Designation & Department: Email ID:
Date of Registration: Reg.No.:	Category of Registration: FT / PTI / PTE/ IS
Department:	Name of the HoD with Email id:
Topic of Research:	

Date of Completion of Maximum Duration: _____

Current Status of Research Work:

Tuition Fees Details

Year	Date of Payment	Amount In Rs
First year		
Second year		
Third year		
Fourth year		
Fifth Year		
Sixth Year		

Details of Publications:

Type of Article (Journal / Proceedings)	Title of Article	Name of Journal / Conference	Vol no. / issue no.	Present status (Communicated/Accepted/ Published/Indexed)

Reason(s) for Seeking Extension: _____

Duration of Extension Requested: _____

Expected Date of Thesis Submission: _____

Recommendation by Supervisor:

I have verified the details furnished by the scholar and recommend the extension of registration for a further period of _____

Signature of Supervisor with date:

Recommendation by HoD

Forwarded with recommendation for approval / not recommended.

Signature of HoD with date:

For office use only

Recommended / Not Recommended for an extension period of _____

Assoc. Dean Research

Vice Chancellor