HINDUSTAN
INSTITUTE OF TECHNOLOGY & SCIENCE
(DEEMED TO BE UNIVERSITY)

Form No: HITS/DRC/ PhD/002

DIRECTORATE OF RESEARCH & CONSULTANCY

PROFORMA FOR REQUISITION OF CONDUCTING DOCTORAL COMMITTEE MEETING

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:
Requested DC meeting: I / II / III /Synopsis	Requested DC meeting Date and Time:
	Name of the Co Supervisor: Designation & Department: Email ID:
Topic of Research:	

Details of DC Members

Chairman	**Internal Member**	**External Member**
Name:	Name:	Name:
Designation:	Designation:	Designation:
Department:	Department:	Department:
Email ID :	Email Id :	Email Id :
Contact Number:	Contact Number:	Contact Number:
Address:	Address:	Address:

Tuition Fees Details

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

Information of Completed DC meetings & Comprehensive Viva:

DC Meetings / Comprehensive Viva	Date
First DC	
Comprehensive viva	
Second DC	
Third DC	

DC meeting fee details:

Date of Payment	Transaction ID	Amount in Rs

It should be verified with Accounts dept.

Signature of the Supervisor Signature of the Coordinator Signature of the HoD

Note:

1. Copy of DC meeting fee transaction receipt should be attached along with DC meeting form
2. The form should be submitted **at least one week before the scheduled date of meeting**
3. Progress Report of the scholar should be circulated among DC members by supervisor at least one week before the scheduled date of DC meeting

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For office use only

Recommended / Not Recommended to conduct_____ DC / Synopsis meeting

Assoc. Dean Research