

Evaluation Form for ME / MS (Initial Seminar)

PARTICULARS

Roll No. _____

Date: _____

Name: _____

Supervisor: _____

Co-Supervisor: _____

Title of Research Proposal:

EVALUATION

Max. 10 Marks for each

- a. The latest findings in the research conducted already by other scholars related to the proposed research work if any (Citation, references and literature review.
- b. New aspect(s) to be covered
- c. Ultimate utility of the proposed research work
- d. Presentation and defense of proposed research proposal

RECOMMENDATIONS

- 1. Proposed research topic be approved and allowed for registration?
- 2. Seminar be repeated?

<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Yes	<input type="checkbox"/> No

SUGGESTIONS / COMMENTS (IF ANY):

External

Internal

AS&RB Member

Signature: _____

Name: _____