



INDIAN INSTITUTE OF TECHNOLOGY INDORE
Form for Comprehensive Evaluation of Research Progress (CERP)

Name of the Student _____

Academic Program (PhD/MSc/MS(Research)/MTech/BTech+MTech): _____

Roll No: _____ Category of Admission (TA/FA/DF/SW/IS/CT): _____

If FA, then Agency of Funding: _____

Discipline/ School/ Center: _____

Date of Joining of the Program: _____

Date of Registration to the Program: _____

Date of Confirmation (for PhD and Dual Degree programs): _____

Theme of Research work: _____

Thesis Title (if finalized): _____

Duration of Present Review: From _____ to _____

* Current **CERP** Date: _____ Time: _____ Venue: _____

Whether SPGC approval was taken for delayed CERP presentation: Yes/No/Not Applicable (if yes, please attach a copy of approval)

*For 1st CERP: The PSPC may opt to replace the seminar by an interview of the candidate to ascertain the progress in the coursework and in preliminary research work or literature review done for thesis.

Details of previous CERP (earlier referred as RPS) presented

CERP No.	Delivered on	Performance (to be filled by the Academic Office)
CERP 1		
CERP 2		
CERP 3		
CERP 4		
CERP 5		

Evaluation and Recommendations of PSPC (please use extra sheet, if required)
(Detailed comments must be communicated directly to the concerned student also)

Item	Evaluation/Recommendations of PSPC
Quality of work done	
Quantity of work done	
Overall progress	
Recommendation or not for continuation in the Program	
Recommendation or not for continuation of scholarship	
Recommendation or not for enhancement of scholarship and date of enhancement	
CERP to be repeated, if yes then latest date of repeat of CERP (if applicable)	
Details of Publications and Patents [attach separate sheet giving details of publications and patents signed by concerned student and his/her Thesis Supervisor(s)]	Number of papers published in refereed journals: Number of papers published in refereed conference proceedings: Number of book chapters: Number of papers under review (journal + Conference): Details of patent(s) and/or application(s), if any:
Expected month and year of completion of program (from date of joining)	
Other remarks /recommendations /observations by the PSPC members (please use extra sheet, if required)	
Remarks by Thesis supervisor(s) (please use extra sheet, if required)	
Name and signature of PSPC members with date and their Discipline name:	
Name and signature of thesis supervisor(s) with date:	

Remarks/Recommendations/Observations by Convener, DPGC:

(Signature with date)

Remarks/Recommendations/Observations by the HOD (or HOSH)

Remarks/Recommendations/Observations by SPGC:

(Signature with date)
