**Proforma - IX(a)**

**CHECK LIST BEFORE CONDUCTION OF Ph.D. SYNOPSIS DC**

*(To-be filled by the Supervisor)*

Name of Research Scholar**:** Reg. No **:**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | **Supervisor** | **Coordinator-AR** |
| 1 | Registration Communication enclosed | Yes/No | Yes/No |
| 2 | DC Constitution Order enclosed | Yes/No | Yes/No |
| 3 | Whether Synopsis DC is conducted after the minimum duration and before the maximum duration | Yes/No | Yes/No |
| 4 | If the maximum duration is over, copy of the extension order is enclosed | Yes/No/NA | Yes/No/NA |
| 5 | Extension Fees paid at cash counter &the original receipt has been enclosed | Yes/No/NA | Yes/No/NA |
| 6 | The External Doctoral Committee has recommended to conduct Synopsis DC (Pre-Synopsis DC) | Yes/No | Yes/No |
| 7 | DC Approved course work has been completed  (copy of grade statement enclosed) | Yes/No | Yes/No |
| 8 | Reprint of the journal publications of the scholar as required by the regulations are enclosed | Yes/No | Yes/No |
| **9** | **Scholar’s Author Page in Scopus/Web of Science** | **Yes/No** | **Yes/No** |
| 10 | No dues Certificate (original) is enclosed  (available in Office of Academic Research) | Yes/No | Yes/No |
| 11 | All the DC Minutes, Fee Receipts, Semester Progress reports are enclosed | Yes/No | Yes/No |

I am herewith forwarding the documents mentioned above, checked and found correct.

Place: Signature of Supervisor

Date: (Name and Address with Seal)

**Submitted to HoD**

The scholar is permitted to proceed for the conduction of Synopsis DC.

Place: Signature of Coordinator-AR

Date: (Name and Address with Seal)

*(Note: HoDs shall nominate representatives for the synopsis DC of a scholar only after submission of this checklist – Proforma IX).*