

**St. Peter's University**  
**St. Peter's Institute of Higher Education & Research**  
 (Declared under Section 3 of the UGC Act, 1956)  
 College Road, Avadi, Chennai 600054

**Format for Six monthly Progress Report to be submitted by Candidates**  
**(Full time/Part time candidates)**

- i. The progress reports shall be submitted by the candidate before the Doctoral Committee accompanied by a report by the candidate about the work carried out during the period of this report (in about 300 words). The same shall be duly signed by the Supervisor and Joint Supervisor (if applicable).
- ii. One copy is to be detained by the Supervisor, one copy by the candidate and one copy to be submitted to the Dean (R&D) once in six months, immediately after placing before the Doctoral Committee constituted for the candidate.

Note: Failure to submit two consecutive six monthly progress reports will entail the cancellation of registration of the candidate by the Vice Chancellor on a report made by the Supervisor and/or the Dean (R&D) in this behalf.

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|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| 1. Particulars about the candidate:                                                                                                                               |  |
| a) Name:<br>b) Designation:<br>c) Institution where working:<br>d) Period of the report:<br>e) Date of provisional registration with University reference:        |  |
| 2. Registration Details:<br>a) Category of registration:<br>b) Has the provisional registration been confirmed:<br>c) If yes, give University approval reference: |  |
| 3. Particulars of the Supervisor:<br>a) Name:<br>b) Designation:<br>c) Institution where employed :                                                               |  |
| 4. Particulars of the Joint Supervisor:<br>(if any)<br>a) Name:<br>b) Designation:<br>c) Institution where employed :                                             |  |
| 5. Particulars of the Doctoral Committee Members :<br>1. Name:<br>Designation:<br>Institution where employed:                                                     |  |

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|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| 2. Name:<br>Designation:<br>Institution where employed:                                                                                                                                                                                                                                          |  |
| 6. Name of Department / Institution where research is conducted :                                                                                                                                                                                                                                |  |
| 7. Area of work and tentative title of the proposed thesis :                                                                                                                                                                                                                                     |  |
| 8. Details of progress of research:<br>a) Whether the candidate's report in quadruplicate is enclosed :<br>b) Whether papers have been published (if yes, furnish details) :<br>c) Whether seminars/conferences attended<br>d) Whether completed the prescribed course work (if yes, how many) : |  |
| 9. Has the annual research fee been paid for the year(s) :                                                                                                                                                                                                                                       |  |

Date :  
Place :

Signature of candidate

|                                            |                                 |
|--------------------------------------------|---------------------------------|
| 10. Remarks of the Supervisor :            |                                 |
| a) Attendance :                            | Satisfactory / Not Satisfactory |
| b) Progress :                              | Satisfactory / Not Satisfactory |
| c) Expected time of completion of thesis : |                                 |

11. Whether the Supervisor agrees with the scholar's report (if no, please give reasons) :

12. Whether the Joint Supervisor agrees with the scholar's report (if no, please give reasons) :

I/We hereby certify that the candidate has put in necessary attendance and shown progress in his/her research and he/she may be permitted to continue research.

Date :  
Place :

Signature of Supervisor  
Name: