

ST. JOSEPH UNIVERSITY, NAGALAND

[A State Private University Established Under Nagaland Govt. Act No.6 of 2016: Recognized by University Grants Commission (UGC), Approved by All India Council for Technical Education]

CENTRE FOR RESEARCH

| Six Monthly Progress Report of Ph.D. work | | | | | | | |
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| Progress Report No. / Semester: | | | Date: | | | | |
| Name of the Research Student | : | | | | | | |

| Registration Number | : | |
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| Department | : | |
| Name of the Supervisor | : | |
| Supervisor Recognition No | : | |
| Month & year of Registration | : | |
| Mode of Registration | : | Full Time / Part Time |
| Approved Title of the Ph.D. Research | : | |
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| Report for the Period | : | From: To: |
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| Address for Communication | : | |
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| Mobile No & E- Mail | : | |
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| Precise Report of the Research work done during the above period (Detail Report Should be |
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| attached in a separate Annexure, duly signed by Research Scholar & Supervisor) |
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| Rema | rks of the Res | earch Guide | | | | |
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Note: The Form should be submitted to the Research Coordinator by the candidate, after obtaining no dues from the accounts office