



# SATHYABAMA

INSTITUTE OF SCIENCE AND TECHNOLOGY

(DEEMED TO BE UNIVERSITY)

Accredited "A++" Grade by NAAC | 12B Status by UGC | Approved by AICTE

www.sathyabama.ac.in

## MINUTES OF THE SECOND DOCTORAL COMMITTEE / COMPREHENSIVE MEETING

Date of Meeting : \_\_\_\_\_ Time: \_\_\_\_\_

Fee Details (Enclose Copy)

Date	Amount	Receipt No.

### Scholar Details:

- Name : Mr./Ms. \_\_\_\_\_ Register Number : \_\_\_\_\_
- Year of Admission \_\_\_\_\_ FACULTY : \_\_\_\_\_
- Category : FULL TIME / PART TIME (Internal) / PART TIME (External)
- Official Address: \_\_\_\_\_ Residence Address: \_\_\_\_\_  
\_\_\_\_\_
- Mobile No : \_\_\_\_\_ Email : \_\_\_\_\_

### Supervisor Details:

- Name of the Supervisor :
- Name of the Joint Supervisor (if any) :

The following members were present

Sl. No.	Name of the Expert & MOBILE No.	OFFICE ADDRESS
1		
2		

RESEARCH TITLE : \_\_\_\_\_

RECOMMENDATIONS OF THE COMMITTEE : Please attach a separate sheet if required

After evaluating the Comprehensive examination performance and presentation thoroughly the committee recommends to **CONFIRM** / **NOT TO CONFIRM** the registration of the above PhD scholar.

Signature & Name  
of the Member

Signature & Name  
of the Supervisor

Signature & Name  
of the Member