

School of Planning and Architecture, Bhopal

(An Institution of National Importance, Ministry of Education, Government of India)
Neelbad Road, Bhauri, Bhopal – 462030 (M.P.), India

PhD Supervisor Consent Form

1. Name of the Candidate: _____
2. Scholar Number: _____
3. Proposed Research Topic / Area: _____

4. Name and Designation of the proposed Supervisor: _____
5. Complete Postal address of the proposed Supervisor: _____

6. Email and Contact / Mobile No.: _____

7. Consent of the proposed Supervisor: I am willing to supervise Ms./Mr./Mrs. _____
_____ for his/her PhD Programme in the area of
research _____
_____ for the registered term. The rules and regulations of the Institute,
concerning the PhD Programme and relevant matters are fully acceptable to me and will be abided
(please enclose the CV of the proposed supervisor, if s/he is not a faculty member of SPA Bhopal).

(Signature of the Supervisor)

Dated _____

Place _____

(Signature of the PhD Scholar)

Dated _____

Place _____

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Neelbad Road, Bhauri, Bhopal – 462030 (M.P.), India

PhD Checklist

(Applicable to the PhD batches registered **before** AY 2024-25)

Name of the Scholar					
Scholar No.					
Date of Registration					
Co-Supervisor Name					
Re-Registration (if any)					
Re-Registration (if any)					
S.No.	Particulars	Ordinance	Whether Fulfilled		Remarks
			Yes	No	
1	Overall tenure	Years from the date of registration [3.2 of Ordinance 2020 amended]			
2	TFS Date	Two year- 2 consecutive semesters [3.3 of Ordinance 2020 amended]			
3	Coursework completion date	One year six months - three consecutive semesters [3.3 of Ordinance 2020 amended]			
4	Fee Details	1) 2) 3)			
5	Leave (if any)	1) Normal Leave of 15 days in a semester (Max 30 days in one year) 2) Maternity / Paternity Leave 3) Academic Leave [Ordinance 2018] 4) Break of maximum two consecutive semesters (without changing the total tenure) after taking due approval from DRC, duly approved by Senate Chairperson [Ordinance 2020 amended]			
6	Pre-Thesis Seminar	To be conducted in a minimum of five semesters and a maximum of eight semesters from the date of registration [11.5 of Ordinance 2020 amended] Other Conditions - [Regulation 24 of Ordinance 2018]			
7	Publication	Before submission of the Final Dissertation Report, a PhD scholar shall get atleast one research paper published in peer reviewed SCI/SSCI/UGD Care indexed journal where scholar is the main author. [Regulation 25 of Ordinance 2018]			
8	Final Dissertation Report	Final report to be submitted by the PhD Scholar for external evaluation within maximum time period of 10 semesters (05 years)* [3.2 of Ordinance 2020 amended]			
9	External Evaluator (Indian)				
10	External Evaluator (Foreign)				
11	External Evaluator (Indian) (if re-sent)				
12	External Evaluator (Foreign) (if re-sent)				

Signature
(Coordinator, Doctoral Programme)

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PhD Checklist

(Applicable to the PhD batches registered w.e.f. AY 2024-25)

Name of the Scholar					
Scholar No.					
Date of Registration					
Supervisor Name					
Co-Supervisor Name					
Re-Registration (if any)					
S.No.	Particulars	Relevant Regulation of Ordinance for Doctoral Programmes (Amended) 2024	Whether Fulfilled		Remarks
			Yes	No	
1	Overall tenure	Years from the date of registration (RG-23)			
2	TFS Date	Maximum period of first 2 years (4 consecutive semesters) (RG-12)			
3	Coursework completion date	One year six months (3 consecutive semesters) (RG-23c)			
4	Fee Details	1) 2) 3)			
5	Leave (if any)	RG-29			
6	Pre-Thesis Seminar	To be conducted in a minimum of five semesters and a maximum of eight semesters from the date of registration (RG-24c)			
7	Publication	RG-25			
8	Final Dissertation Report	RG-26			
9	External Evaluator (Indian)				
10	External Evaluator (Foreign)				
11	External Evaluator (Indian) (if re-sent)				
12	External Evaluator (Foreign) (if re-sent)				

Signature
(Coordinator, Doctoral Programme)

[THESIS TITLE]

A Thesis

Submitted in partial fulfillment of the requirement for the award of the
degree of

Doctor of Philosophy

In

[Department Name]

By

[Name of the Candidate/ Scholar]

[Roll/ Scholar Number]

Under the Supervision of

[Name of Supervisor]

[Name of Co-Supervisor, if any]

[Logo of the Institute]

School of Planning and Architecture Bhopal

Neelbad Road, Bhopal – 460 030

[Month, year of submission]

Declaration

I, _____, Roll / Scholar No. _____ hereby declare that the thesis titled “_____” submitted by me in partial fulfillment for the award of DOCTOR OF PHILOSOPHY in the Department of _____, School of Planning and Architecture Bhopal, India, is a record of bonafide work carried out by me. The matter/results embodied in this thesis have not been submitted to any other University or Institute for the award of any degree or diploma.

[Name and Signature of Candidate/ Scholar]

Date: _____

[Roll/ Scholar No.]

Certificate

This is to certify that the thesis titled “_____” submitted by _____ in partial fulfillment for the award of DOCTOR OF PHILOSOPHY, in the Department of _____, School of Planning and Architecture Bhopal, India, is a record of bonafide work carried out by her to the best of my knowledge. The matter/results embodied in this thesis have not been submitted to any other University or Institute for the award of any degree or diploma.

Recommended by

Signature of Supervisor/ Co- Supervisor with date

[Name of Supervisor and Co- Supervisor with the Department]

Accepted by

Signature of DRC Chairperson with date

[Name of the Department]

School of Planning and Architecture, Bhopal

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External Examiner's Evaluation Report

1. Title of the Dissertation: _____

2. Department: _____

3. Details of External examiner:

Name: _____

Designation and Institution: _____

Address/email: _____

4. Recommendations of the External Examiner (kindly indicate your recommendation by checking the appropriate box)

A.	I recommend acceptance of the dissertation in its present form	
B.	I recommend acceptance of dissertation subject to the candidate	
	(i) furnishing satisfactory clarifications to the queries during the viva voce examination	
	(ii) incorporating the corrections indicated in the evaluation report, but the revised Thesis report need not be sent	
	(iii) incorporating the corrections indicated in the evaluation report and re-submission of the revised Thesis report	
C.	I do not recommend acceptance of the Thesis for the reasons furnished in the evaluation report	

I enclose herewith the evaluation report

(Signature of the External Examiner)

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External Examiner's Evaluation Report

1) Title of the Dissertation:

Comments of the External Examiner may kindly address the following:

- | | |
|---|----------|
| 1. Is the title appropriate or does it require any modification? | Yes / No |
| 2. Is the aim of the research clearly stated? | Yes / No |
| 3. Are the objectives clearly achieved as stated in the research? | Yes / No |
| 4. Is the literature review sound? | Yes / No |
| 5. Has the scholar used sound research methods to achieve the objectives? | Yes / No |
| 6. Has the scholar interpreted the findings correctly? | Yes / No |
| 7. Has the scholar successfully concluded the dissertation in relation to the objectives? | Yes / No |
| 8. Does the research lead to a fresh approach towards interpretation of facts / theories? | Yes / No |
| 9. Are graphics, photos, illustrations used where needed? | Yes / No |
| 10. Are the writing and structure clear? | Yes / No |
| 11. Is the language comprehensive? | Yes / No |
| 12. Are the references / resources clearly acknowledged? | Yes / No |

(Although the comments are sought in binary form, it is only indicative. Kindly use extra sheet to write down your comments against the above mentioned queries)

1) I rate overall work of the scholar as :

- Excellent
- Good
- Satisfactory
- Below expectation
- Unsatisfactory

Name and Signature of the External Examiner

Place and Date: _____

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Honorarium for Evaluation of PhD Dissertation Report

1. Name of the External Examiner, Designation and Address:

2. Title of the Dissertation:

3. Remuneration and other charges:

Sl. No.	Item of Reimbursement	Receipt / Voucher Nos.	Amount
a)	Honorarium for Evaluation of the Dissertation Report		5,000/-
b)	Expenditure towards postal charges, if any, for returning the dissertation report		NIL
c)	Total charges claimed		

{Indicate **Nil** against (b) in case no postal expenses are incurred}

Amount claimed (in Words) _____

4. Miscellaneous Information

- Account Name:
- Name of Bank:
- Branch:
- IFSC Code:
- Account No.
- Type of Account:
- PAN :

(Signature of the External Examiner)

Place and Date: _____