

Gujarat Technological University

**Continues Evaluation Report to be issued by the Ph.D. Supervisor
(To prepare a report on monthly basis)**

1.	Name of the Full-Time Research Scholar	
2.	Enrollment Number	
3.	Discipline	
4.	Research Title	
5.	Name of Institute where the student is working (Supervisor/Co-Supervisor workplace – whichever applicable)	
6.	Approved DPC Date	
7.	Month/Year of attendance	
8.	Detailed Report of the Student during the month	
8.	Progress of Student	Excellent <input type="checkbox"/> Good <input type="checkbox"/> Very Good <input type="checkbox"/> Average <input type="checkbox"/> Poor <input type="checkbox"/>

Name of Ph.D. Supervisor: _____
Designation: _____
Institute Name: _____
Signature : _____ Date: _____

Name of Head of Department: _____
Institute Name: _____
Signature: _____ Date: _____

Signature & Seal of Institute