

APPENDIX

LIST OF FORMS TO BE USED FOR THE PHD PROGRAMME

Form No.	Description
NISTU/PhD/01	Application for Enrollment to PhD Programme
NISTU/PhD/02	Assignment of Enrolment Number
NISTU/PhD/03	Application for Provisional PhD Registration
NISTU/PhD/04	Format for Panel of Proposed RAC Members
NISTU/PhD/05	Assignment of Provisional PhD Registration Number
NISTU/PhD/06	Semester Registration
NISTU/PhD/07	Application for Formal PhD Registration
NISTU/PhD/08	Assignment of PhD Registration Number
NISTU/PhD/09	Format for Change of Thesis Title
NISTU/PhD/10	Format for Research Progress Report
NISTU/PhD/11	Application for Synopsis Seminar
NISTU/PhD/12	Format for Submission of Examiners List
NISTU/PhD/13	Application for Thesis Submission
NISTU/PhD/14	Format for Examiner's Report
NISTU/PhD/15	Format for Viva Voce Examination Report
NISTU/PhD/16	Format for PhD extension
NISTU/PhD/17	Format for Registration of External Supervisor
NISTU/PhD/18	Application for Change of Supervisor/Joint-Supervisor



NIST UNIVERSITY, INSTITUTE PARK, BERHAMPUR, ODISHA - 761008

APPLICATION FOR ENROLLMENT TO PhD PROGRAMME

1. Full Name of the PhD Student:

Mr./Mrs./Miss_____

(IN BLOCK CAPITAL LETTERS) (As per 10th Certificate)

2. Academic Programme: PhD (Engineering/Management/Science):

3. Name of the Department:

4. Father's/Husband's Name:

5. Mother's Name:

6. Permanent Address:

7. Present Address with email id and phone no:

8. (a) Date of Birth:

(b) Student Category (Full Time/Part Time):

(c) Nationality:(d) Category (SC/ST/Differently abled/General):

9. Qualification:

Exam passed	Discipline/specialization	Board/University	Year of passing	class/Division	% marks / CGPA
10 th					
12 th					
Graduation					
Post-Graduation					
Any other					

10. Details of the amount paid towards enrollment fee:

(attach a copy of the payment made)

11.Organization where candidate is working (if employed)

Name of the organization	Designation	Duration	Nature of job	Academic/Industry

Declaration: The information provided above is correct to the best of my knowledge. Further, I undertake to comply with the NISTU PhD Regulations and will not indulge in any unethical practices during my studentship.

Date:

Place:

Signature of the PhD Student

For Office Use

Amount of Enrollment Fee paid Rs. _____ & the Receipt No. / Bank

DD No. _____ & Date: Issuing Bank:

The student is assigned with the following Enrollment Number:

Name of the PhD student:

Name of the department:

Faculty	Session	Discipline/ specialization	Category of studentship (Full time/part time)	Enrollment number with date

Verification

The application and all documents, certificates of the PhD student have been verified with the originals and are found to be correct.

Date:

Signature of the HoD



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ENROLMENT FOR THE PhD PROGRAMME

You have been enrolled into the PhD Programme of NIST University as detailed below.

1. Full Name of the PhD Student : _____
2. Name of the Department : _____
3. Student Category (FullTime/PartTime) : _____
4. Enrolment Number : _____
5. Date of Enrolment : _____

Date:

Signature of the HoD



NIST UNIVERSITY, INSTITUTE PARK, BERHAMPUR, ODISHA - 761008

APPLICATION FOR PROVISIONAL PhD REGISTRATION

1. Enrolment Number : _____
2. Full name of the PhD Student : _____
3. Name of the Department : _____
4. Student Category (FullTime/PartTime) : _____
5. Proposed Area of Research : _____

6. Abstract of the Proposed Research (within 100-150 words)

Signature of the PhD Student



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FORMAT FOR PANEL OF PROPOSED RAC MEMBERS

Name of the Student:

Enrolment No.:

Faculty of:

Proposed area of research:

Branch/ Specialization:

Sl. No	Name of Members	Designation & Affiliation	Telephone No & Address	E-mail, If any
.				
1				
2				
3				
4				
5				
6				

Note: The supervisor is required to propose names of two Professors/Associate Professors within the department and outside the department. Additionally, two external members outside NISTU may be nominated if necessary.

Date:

Signature of Research Supervisor

RECOMMENDATION

Recommended / Not Recommended

Date:

(Head of the Department)

NOMINATION OF TWO MEMBERS TO THE RAC

1. _____

2. _____

Date:

Approval of the DRC Members:



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PROVISIONAL PhD REGISTRATION

You have been provisionally registered for the PhD programme of NIST University as detailed below:

- 1. Enrolment Number : _____
- 2. Provisional PhD Registration Number : _____ / Date: _____
- 3. Full Name of the PhD Student : _____
- 4. Name of the Department : _____
- 5. Student Category (FullTime/PartTime) : _____
- 6. Proposed Area of Research : _____
- 7. Name of the Supervisor (s) : _____
- 8. RAC members for the candidate :

Sl. No.	Name	Designation	Affiliation

9. Recommended Courses for the Pre-PhD Course work:

Sl. No.	Course No.	Course Name

Signature of the Dean of the School/ HoD



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APPLICATION FOR SEMESTER REGISTRATION

1. Full Name of the PhD Student : _____

2. Enrollment No. : _____

3. Name of the Department : _____

4. Semester for which registration is being made:

5. Details of the amount paid towards semester registration:

(Attach a copy of the payment receipt)

Date:

Signature of the PhD Student

For Office Use

Amount of Semester Registration Fee paid Rs. _____&the Receipt

No. / Bank DD No. _____&Date: Issuing Bank:.

Date:

Signature of the HOD



NIST UNIVERSITY, INSTITUTE PARK, BERHAMPUR, ODISHA - 761008
APPLICATION FOR PhD REGISTRATION

- 1. Enrolment Number : _____
- 2. Provisional PhD Registration Number : _____
- 3. Full Name of the Research Student : _____
- 4. Name of the Department : _____
- 5. Student Category (FullTime/PartTime) : _____
- 6. Status of the Pre-PhD Course work : Completed / Incomplete:
Marks/CGPA obtained: _____
(Attach marksheet)
- 7. Status of the Comprehensive Examination : Completed / Incomplete
- 8. Name of the Research Supervisor : _____
- Joint-Supervisor, if any : _____
- 9. Proposed Title of the Thesis : _____
- 10. Research Proposal : _____
(A student has to submit a detailed research proposal in the attached format)

Date:

Signature of the PhD Student

Signature of Research Supervisor(s) with date :

Signature of RAC members with date :

<Proposed Title of the Thesis>

Abstract:

The abstract should contain a brief summary of the Research Proposal, and should be of 200 words (approximately)

KEYWORDS

Important keywords (8-10) in the chosen area of research

Motivation:

Should indicate the motivation behind the proposed research

Literature Review:

Literature Review is a systematic study of the works already done in the chosen area of research. It is a critical component of the research process that supports and strengthens the entire study. It contextualizes the Research and helps in identifying the research gaps. It provides a methodological insight to the work already done. By understanding what has been done and the outcomes of previous research, a literature review can help in designing the research, formulate the research questions, and select appropriate methodologies.

Research Objective(s):

Research objectives play a crucial role in guiding the research process, ensuring that the study is focused, coherent, and capable of producing meaningful and actionable results. A research objective is a clear, concise statement that defines the specific goals or purposes of a research study. It outlines what the researcher aims to achieve through their investigation. Research objectives guide the research design, methodology, and analysis, ensuring that the study stays on track and addresses the intended research questions.

Methodology:

Research methodology refers to the systematic plan and approach employed to conduct research. It encompasses the principles, procedures, and techniques used to collect, analyze, and interpret data or carry out experiments. It plays a significant role in conducting credible and ethical research that can significantly contribute to knowledge in the field.

Conclusions:

The Conclusions shall briefly restate the objectives of research project, recap the research approach planned to be followed, and clarify in a few words what is expected to be found out, why it is valuable to find it out, and on how results are to be validated.

References:

This section should list all the references made throughout the research proposal, ensuring the referencing conventions or citation styles that have been established for specific field.

Date:

Signature of the PhD Student

Signature of Research Joint-Supervisor, if any

Signature of Research Supervisor



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PhD REGISTRATION

You have been registered for the PhD programme of NIST University as detailed below.

- 1. Enrolment Number : _____
- 2. PhD Registration Number : _____
- 3. Date of PhD Registration :
- 4. Full Name of the PhD Candidate : _____
- 5. Name of the Department : _____
- 6. Category (FullTime/PartTime) : _____
- 7. Proposed Title of the Thesis : _____
- 8. Name of the Research Supervisor : _____
- Joint-Supervisor, if any : _____

Date:

Signature of the Controller of Examanitaion



APPLICATION FOR CHANGE OF PhD THESIS TITLE

- 1. Enrolment Number : _____
- 2. PhD Registration Number : _____
- 3. Full Name of the PhD Candidate : _____
- 4. Name of the Department : _____
- 5. Student Category (FullTime/PartTime) : _____
- 6. Name of the Research Supervisor : _____
- Joint-Supervisor, if any : _____
- 7. Proposed Title of the Thesis : _____
(at the time of Registration)
- 8. Suggested change in the Proposed Title : _____
- 9. Details of fee paid : _____
- 10. Justification for the change :

Date:

Signature of the PhD Candidate

Recommendation of the Supervisor(s)

The request for change in the thesis title is recommended as per the justification mentioned above.

Signature of Research Joint-Supervisor

Signature of Research Supervisor

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RESEARCH PROGRESS REPORT

- 1. Full Name of the PhD Candidate : _____
- 2. PhD Registration Number with date : _____
- 3. Name of the Department : _____
- 4. Category(FullTime/PartTime) : _____
- 5. Proposed Title of the Thesis : _____
- 6. Name of the Research Supervisor : _____
- Joint-Supervisor, if any : _____

7. Progress made during the preceding semester

Period From		Planned work	Actual work done
From	To		

- 8. Difficulties encountered, if any :
- 9. Details of publications made during the period :
- 10. Brief description of the work done during the semester (Attach a separate sheet with signature)

Date:

Signature of the PhD Candidate

RECOMMENDATION OF THE RESEARCH ADVISORY COMMITTEE
(RAC)

Name of the PhD Candidate :

PhD Registration Number with date :

The research student has presented his/her work during the preceding semester in an open seminar in our presence and responded to the queries made by the members. The committee feels that his/her progress made during the period is Satisfactory / Not Satisfactory.

Specific Suggestions of the RAC, if any:

Signature of the RAC members:

- 1.
- 2.
- 3.
- 4.
- 5.

Copy forwarded to:

1. The Controller of Examinations for information and necessary action
2. Personal File of concerned PhD Candidate
3. Supervisor / Joint-Supervisor



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APPLICATION FOR SYNOPSIS SEMINAR

1. Full name of the PhD Candidate : _____

2. PhD Registration Number with date : _____

3. Name of the Department : _____

4. Category(FullTime/PartTime) : _____

5. Proposed Title of the Thesis : _____

6. Final Title of the Thesis : _____

7. Synopsis of the work done :

(A student has to submit a synopsis in the attached format and present it before the RAC)

8. Draft copy of the complete thesis :

(A student has to present at least the 1st draft of the complete thesis before the RAC at the time of synopsis seminar)

9. Details of publications made so far related to the proposed area of research:

Date:

Signature of the PhD Candidate



CONSENT OF THE SUPERVISOR(S)

The PhD Candidate has carried out research within the scope of the research proposal and has published the required number of research papers. He/she may be allowed to present his/her synopsis.

Signature of Research Joint-Supervisor, if any

Signature of Research Supervisor

Approval of the RAC members:

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LIST OF EXAMINERS FOR ADJUDICATION OF THE THESIS

1. Full name of the PhD Candidate : _____
2. PhD Registration Number with date : _____
3. Name of the Department : _____
4. Title of the Thesis : _____

Following is the list of probable examiners to adjudicate the thesis:

Sl. No	Name of the Examiner	Designation	Affiliation	Area of specialization	Email-Id & Phone Number
1					
2					
3					
4					
5					
6					
7					
8					

Signature of Research Joint-Supervisor, if any

Signature of Research Supervisor



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APPLICATION FOR THESIS SUBMISSION

- 1. Full name of the PhD Candidate : _____
- 2. PhD Registration Number with date : _____
- 3. Name of the Department : _____
- 4. Category (FullTime/PartTime) : _____
- 5. Title of the Thesis : _____
- 6. Final version of the complete thesis :
(A student has to submit four copies of the final thesis in soft bound form for evaluation)
- 7. Similarity/Plagiarism test certificate :
- 8. Details of fee paid towards thesis submission:

Date:

Signature of the PhD Candidate

RECOMMENDATION OF THE SUPERVISOR(S)

The PhD Candidate has completed the proposed research maintaining the expected quality and has the required number of publications relating to his/her research. It is recommended that his/her thesis be accepted for adjudication.

Signature of Research Joint-Supervisor, if any

Signature of Research Supervisor

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EVALUATION REPORT OF THE PhD THESIS

1. Name of the PhD Candidate : _____
2. PhD Registration Number : _____
3. Name of the Discipline : _____
4. Title of the Thesis : _____

5. Make one of the following recommendations: (Please put \checkmark mark in the box)

- The thesis attains the standard required for the award of the PhD degree. The thesis may be accepted in the present form without any corrections.
- The thesis requires minor revision and re-submission which may be evaluated by the Doctoral Committee of the University.
- The thesis requires major revision and re-submission for re-evaluation by the same examiner.
- The thesis is rejected as it fails to meet the standard for the award of the PhD degree.

6. Name of the Examiner :

7. Designation & affiliation :

Email :

Mobile Phone Number :

Signature of the Examiner

Note:

The examiner is requested to provide a detailed report on the thesis highlighting the major research contributions and the limitations of the work.



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Form No.: NISTU/PhD/15

VIVA VOCE EXAMINATION REPORT OF THE PhD THESIS

1. Name of the PhD Candidate : _____
 2. PhD Registration Number : _____
 3. Name of the Discipline : _____
 4. Title of the Thesis : _____
-

5. Recommendation of the Viva Voce Board:

Full name & Signature of the Members:

- 1.
- 2.
- 3.
- 4.

Signature of the Chairman

Name:

Date:



APPLICATION FOR EXTENSION OF PhD THESIS SUBMISSION

- 1. Enrolment Number : _____
- 2. PhD Registration Number : _____
- 3. Full Name of the Research Student : _____
- 4. Name of the Department : _____
- 5. Category(FullTime/PartTime) : _____
- 6. Name of the Research Supervisor : _____
- Joint-Supervisor, if any : _____
- 7. Title of the Thesis : _____
- 8. Period of Extension Requested : _____
- 9. Details of fee paid : _____
- 10. Justification for Extension :

Date:

Signature of the PhD Candidate

Recommendation of the Supervisor(s)

The request for extension of date for submission of the thesis is recommended as per the justification mentioned above.

Signature of Research Joint-Supervisor

Signature of Research Supervisor



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FormNo.: NISTU/PhD/17

APPLICATION FOR SUPERVISORSHIP TO GUIDE PhD STUDENTS

1. Name : _____

2. Designation : _____

3. Subject Specialization : _____

4. Affiliation : _____

5. Contact Address : _____

6. Email & Phone No. : _____

7. Academic Qualification : Graduation :
(Attach photocopies) Post Graduation :
M.Phil/ M.Tech.
Ph.D. :
Post Doc :

8. Years of experience :

9. Experience in research supervision :

10. Number of research publications :
(Attach a list of publications)

11. No. of students already awarded Ph.D. degree under your supervision :

12. No. of research students currently working under you :

13. Details of Projects completed/ongoing :

14. Any other information :

Date:

Signature



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APPLICATION FOR CHANGE OF SUPERVISOR/CO-SUPERVISOR

Name of the Ph.D student	
Department	
Enrollment No. & Date of Enrollment	
Registration No. & Date of Registration	
Title of Ph.D work	
Name of the Present Supervisor	
Name of the Proposed Supervisor	
Name of the Present Joint-Supervisor	
Name of the Proposed Joint-Supervisor	

Reason for change:

Date: _____ Signature of the Student _____

Consent of the present and proposed Supervisor/Joint-Supervisor

Present Supervisor/Joint-Supervisor	Proposed Supervisor/Joint-Supervisor
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Recommendation by the RAC

Recommended/Not Recommended

Date: _____ Chairperson, RAC _____

Approval by Vice Chancellor

Approved/Not Approved

Date: _____ Vice Chancellor _____