

**FOR Ph.D COURSE(S) FOR A.Y. 20.....-20.....**

(Please submit separate report for each subject)

Date of Inspection

:

Faculty: ..... Subject/Specialty: .....

**1. Name & Address of the College/Research Centre: -**.....  
.....

Name of Head of the Department: - .....

Designation: .....

**2. Department / Subject wise details of available PhD Guides: -**

(Attach Annexure "A")

Sr.No.	Name of Ph.D. Guide	Designation	Date of Birth	Date of Retirement	Total No. of PhD Scholars Registered till date	Has completed six days Research Methodology Workshop? Yes/No	Ph.D Recognition No. and Date
1							
2			NA				
3							
4							
5							

**4. Details of available infrastructure for Research:**

i) Adequate number of Computers with Internet facility is available? Yes / No

ii) Adequate number of Books / Journals are available? Yes / No

iii) Any other specific thing available at the Department:.....  
.....  
.....  
.....**5. Details of Central Research Laboratory:**

i) Available Area (in sq. ft) : .....

ii) Is Drugs/Medicines/Chemicals etc. are available for research? Yes / No

iii) Is Adequate number of Instruments are available? Yes / No

iv) Is Records of Stock book available? Yes / No

**6. Details of Central Animal House:**

i) Available Area in sq. ft: .....

ii) Functioning Central Animal House? Yes / No

**7. Details of Institutional Ethical Committee: (Attach Annexure "B")**

i) Date of Composition: .....

ii) Total Number of Members: .....

iii) Number of meetings held in previous year: .....

iv) Whether Records of proceedings are maintained properly? Yes / No

v) Is Human and Animal Ethics Committee, registered under the appropriate authority? Yes / No

College Letter HeadList of Ph.D. Guides Available at Ph.D. Research Centre

Sr. No.	Name of Ph.D. Guide	Designation	Date of Birth	Date of Retirement	Total No. of PhD Scholars Registered till date	Has completed six days Research Methodology Workshop? Yes/No	PhD Recognition No. and Date
1							
2							
3				N.A.			
4							
5							

Date:

Signature, Name and stamp of  
Dean/Principal/Director

College Letter HeadDetails of Institutional Ethical Committee

## A) Details of Institutional Ethical Committee

Sr.No.	Name of Ethical Committee Member	Designation
1	N.A.	
2		
3		
4		
5		

Date:Signature, Name and stamp of  
Dean/Principal/Director

ANNEXURE- XId

College Letter HeadDetails of Research Advisory/ Doctoral Committee

Sr.No.	Name of Research Advisory/ Doctoral Committee/Subject expert Member	Designation
1	N.A.	
2		
3		
4		
5		

Date:Signature, Name and stamp of  
Dean/Principal/Director