**Form No. 2**

|  |  |  |
| --- | --- | --- |
| Monogramme New | **Acharya Narendra Deva University of Agriculture & Technology,**Kumarganj, Ayodhya-224229 (U.P.) India | **C:\Users\acer\Downloads\NAAC Logo.jpg** |

PROGRAMME OF WORK FOR POST-GRADUATE STUDENT

M.Sc./M.V.Sc./M.Tech./M.F.Sc./M.B.A./Ph.D. …………………..

To,

The Dean,

Post Graduate Studies

The advisory Committee of Mr./Ms. …………………………………………………….. Id. No. …………………………..………… admitted to M.Sc./M.V.Sc./M.Tech./M.F.Sc./M.B.A./Ph.D. …………………………….. Programme in the College of ……………………… in academic session…………………………. Semester ………. Majoring in …………………. After a conference with him/her, submit the following statement and recommendation.

Field of thesis research : ………………………………………………

**ACADEMIC QUALIFICATION PRIOR TO JOINING THE UNIVERSITY**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Degree or diploma**  | **Institution**  | **Year of Passing**  | **Division**  | **Aggregate Marks**  | **Percentage of Marks/ OGPA** | **Elective Subject**  |
| High School  |  |  |  |  |  |  |
| Intermediate  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

**Undergraduate courses for the elective subject :**

|  |  |  |  |
| --- | --- | --- | --- |
| **Course No.**  | **Course Title**  | **Credit hours**  | **Grade**  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Previous post graduate courses taken, if any, for the major and minor subjects –**

**Major-**

|  |  |  |  |
| --- | --- | --- | --- |
| **Course No.**  | **Course Title**  | **Credit hours**  | **Grade**  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Minor-**

|  |  |  |  |
| --- | --- | --- | --- |
| **Course No.**  | **Course Title**  | **Credit hours**  | **Grade**  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Additional Course (if any)-**

|  |  |  |  |
| --- | --- | --- | --- |
| **Course No.**  | **Course Title**  | **Credit hours**  | **Grade**  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Courses to be completed by the student to meet degree requirement –**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Classification of Courses**  | **S.No.**  | **Course No.**  | **Title of Courses**  | **Credit**  |
| 1. Deficiencies to be completed
 | 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 1. Major
 | 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 4 |  |  |  |
| 5 |  |  |  |
| 6 |  |  |  |
| 7 |  |  |  |
| 8 |  |  |  |
| 9 |  |  |  |
| 10 |  |  |  |
|  |  | Total- |  |
| 1. Minor
 | 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 4 |  |  |  |
| 5 |  |  |  |
|  |  | Total- |  |
| 1. Supporting Courses
 | 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
|  |  | Total- |  |
| 1. Additional courses/

Non-credit courses | 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 4 |  |  |  |
| 5 |  |  |  |
| 6 |  |  |  |
|  |  | Total- |  |
|  |  |  | **Grand Total-** |  |

**ADVISORY COMMITTEE**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | **Name & designation**  | **Signature**  |
| Major Advisor & Chairman  | : |  |  |
| Members:  |  |  |  |
| Major  | : |  |  |
| Minor  | : |  |  |
| Supported Field or Co-Advisor | : |  |  |
| Dean, PGS Nominee  | : |  |  |

Recommended & forwarded (9 copies) to the Dean, Post Graduate Studies for approval.

 **Date------------------------- Head of Department**

 **Dean of the College**

**Dean, Post Graduate Studies**

C.C.

1. Registrar
2. All member of Advisory Committee
3. Head of Department
4. Dean of the College
5. Student