



केन्द्रीय प्रौद्योगिकी संस्थान कोकराझार
CENTRAL INSTITUTE OF TECHNOLOGY KOKRAJHAR

Deemed to be University, MHRD, Govt. of India
Kokrajhar, BTAD, Assam 783370

www.cit.ac.in

FORMATION OF COMPREHENSIVE EXAMINATION COMMITTEE

1. Name of the Student :

2. Roll Number :

3. Academic Department/ Center :

4. Joined PhD Programme during : ODD Semester / EVEN Semester
(Put a Tick Mark)

5. Present Type/Category of the Student: (Put a Tick Mark) Full Time / Part Time
Regular / Sponsored / Self-Financed / Project-Staff / External / QIP

6. PhD Course Work: Waived / Completed Successfully at the end of ODD / EVEN Semester of AY.....
In the Course Work: Total Credits Registered / Earned: Final CPI:

7. Name(s) of Supervisor(s):
(if appointed)

8. Mode of Comprehensive Examination: Oral only / Written only / Both Oral and Written

9. Proposed Date of Comprehensive Examination: Oral:..... Written:.....

10. Syllabus of Comprehensive Examination is provided to the students: Yes / No (Pl. enclose a copy)

11. Comprehensive Examination Committee Members for Oral Exam only / Written Exam only / Both Oral and Written :

Sl. No.	Name	Role	Signature
(i)		Chairperson	
(ii)		Member	
(iii)		Member	
(iv)		Member	
(v)		Member	
(vi)		Member	

Signature of Member Secretary, DPPC/CPPC		Signature of Chairperson, DPPC/CPPC	
Remark, if any:	Put up for approval.	Approved	
Date:	Dealing Staff of Academic Affairs Section	Chairperson, IPPC	

Note: This form is to be submitted one month prior to the proposed date of comprehensive examination.
After signature of the Chairperson, IPPC, the original is to be kept in the personal file of the student in the Academic Affairs Section and photocopy / scanned electronic copy is to be sent to the Chairperson, Comprehensive Exam Committee and to the Chairperson, DPPC/CPPC.