

# EVALUATION FORM FOR ME / MS (FINAL SEMINAR)

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Roll No. \_\_\_\_\_

Supervisor: \_\_\_\_\_

Title of Research Proposal: \_\_\_\_\_

## **EVALUATION**

<b>Description</b>	<b>Passing Marks</b>	<b>Obtained Marks</b>
Presentation	06 out of 10	
Literature Review/Survey	06 out of 10	
Originality of work	06 out of 10	

**\* < 06 marks will be considered as FAIL.**

## **RECOMMENDATIONS**

Whether the candidate be allowed to appear in the final thesis Examination for award of Master's Degree?	Yes	No
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## **SUGGESTIONS / COMMENTS (IF ANY):**

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External

Internal

AS&RB Member

Name: \_\_\_\_\_ Signature: \_\_\_\_\_