DIRECTORATE OF ADVANCE STUDIES AND RESEARCH
THE UNIVERSITY OF AGRICULTURE SWAT

No. /DASAR/UoAS Dated: / /

This Performa must be Submitted in First Semester for All Postgraduate Students to the office of the Director Advanced Studies and Research

PROFORMA FOR SUPERVISORY COMMITTEE
(Overwriting is Not Allowed)

Program &Specialization _____ ***Session*** _____

1. Department _____
2. ***Name of Student*** _____ Class No. _____
3. *Registration No.* _____ 4. Date of Admission _____
5. ***Scholarship (if any)*** *Yes/No****. If yes, HEC or other*** _____ ***PIN code*** _____
6. ***Supervisory Committee (Regulation No----------):***

i. _____ _____ ***Chairman Supervisory Committee***
Name with field of Specialization ***Signature*** ***(With date)*** ***(Major field of Study)***

Designation: _____

a. Number of PhD Students under supervision of Major Supervisor shall not exceed five (attach list) _____

b. Number of Students produced i. PhD _____ and ii. M.Phil. _____ (Please Attach list)

ii. _____ _____ **Co**- Supervisor for Research* (If any)
Name with field of Specialization ***Signature*** ***(With date)*** (Major field of Study)

Designation: _____
Department: _____
*Shall belong to the Institution where the candidate is permitted to undertake research (regulation 47-vi).

iii. _____ _____ ***Member (Major field of study)***
Name with field of Specialization ***Signature*** ***(With date)***

iv. _____ _____ ***Member (*Minor field of study)***
Name with field of Specialization ***Signature*** ***(With date)***

*Where student will study minor courses relevant to his major field of study

_____
Student of Signature

Recommended by:

Chairman of the Department/ Director of the Institute _____ Office Seal
Signature

Dean of the concerned Faculty _____ Office Seal
Signature

Accepted / Returned for revision
D.DASR/A.DASR

_____
Director Advanced Studies and Research