



Ph.D

FORM 3

ಕೃಷಿ ಮತ್ತು ತೋಟಗಾರಿಕೆ ವಿಶ್ವವಿದ್ಯಾಲಯ, ಶಿವಮೊಗ್ಗ
UNIVERSITY OF AGRICULTURAL AND HORTICULTURAL SCIENCES, SHIVAMOGGA
Directorate of Postgraduate Studies

PLAN OF WORK FOR Ph. D PROGRAMME

1. Name of the Student and :
ID No. :
2. Year of Admission :
3. Degree Programme :
4. Major Subject :
5. Details of Bachelor's degree Programme
 - (i) Degree Programme in :
 - (ii) Duration of the course :
 - (iii) Year of Passing :
 - (iv) Institution where studied :
 - (v) Class obtained :
 - (vi) Overall Grade Point Average : out of .
 - (vii) Courses taken : *Copy of the B.Sc. marks card enclosed.*
6. Details of Master's degree Programme
 - (i) M.Sc. Programme in :
 - (ii) Year of Passing :
 - (iii) Institution where studied :
 - (iv) Major Subject :
 - (v) Overall Grade Point Average : out of .
 - (vi) Details of Courses studied : *Copy of the M.Sc. marks card enclosed.*

I Semester (year)

Course No.	Title	Credits	Course No.	Title	Credits
	<u>Major Courses</u>			<u>Minor Courses</u>	
1			1		
2			2		
3			3		
4			4		
5			5		
6				<u>Supporting courses</u>	
			1		
			2		
			3		
TOTAL			TOTAL		

Total Credits for the Semester:

Course No.	Title	Credits	Course No.	Title	Credits
	<u>Major courses</u>			<u>Minor courses</u>	
1			1		
2			2		
3			3		
4			4		
5			5		
6				<u>Supporting courses</u>	
			1		
			2		
			3		
TOTAL			TOTAL		

Total Credits for the Semester:

P.T.O

Course No.	Title	Credits	Course No.	Title	Credits
	<u>Major courses</u>			<u>Minor courses</u>	
1			1		
2			2		
3			3		
4			4		
5			5		
6					
	<u>Others</u>			<u>Supporting courses</u>	
	Seminar		1		
	Research		2		
			3		
TOTAL			TOTAL		

Total Credits for the Semester:

P.T.O

IV Semester (year)

Course No.	Title	Credits	Course No.	Title	Credits
	<u>Major courses</u>			<u>Minor courses</u>	
1			1		
2			2		
3			3		
4			4		
5			5		
6					
	<u>Others</u>			<u>Supporting courses</u>	
	Qualifying examination		1		
	Seminar				
	Research		2		
			3		
TOTAL			TOTAL		

Total Credits for the Semester:

P.T.O

V Semester (year)

Course No.	Title	Credits
	Seminar	
	Research	
TOTAL		

Total Credits for the Semester:

VI Semester (year)

Course No.	Title	Credits
	Seminar	
	Research	
TOTAL		

Total Credits for the Semester:

8. Transfer of credits, if any, in case of re-admission

Course No.	Title	Credits

9. Abstract of total credits proposed to be covered

<u>Subject</u>	<u>No. of Credits</u>
Major subjects	:
Minor subjects	:
Supporting subjects	:
Qualifying examination	:
Seminar	:
Thesis/Research	:
Total	:

10. Tentative title of the research problem:

Signature of the Student

Email I.D.
Mob. No.

Signature of the Chairperson

Email I.D.
Mob. No.

Submitted to Dean (Agri.) / Dean (Hort.) / Dean (Forestry)
for further needful.

Date: / /

Signature of the
Head of the Department

Email I.D.
Mob. No.

Forwarded to Dean (PGS) for further needful.

Date: / /

Dean (Agri.) / Dean (Hort.) /
Dean (Forestry)

Email I.D.
Mob. No.

Approved

Date: / /

Dean (PGS)

NB: Please submit four copies of Form No. 3.

No. Dean (PGS) / UAHS / Form No. 2, 3 & 4 / ____ / ____

Date: / /

To,

1. The Concerned Chairperson
2. The Concerned HOD
3. File