



**Ph.D. FORM 4**

ಕೃಷಿ ಮತ್ತು ತೋಟಗಾರಿಕೆ ವಿಶ್ವವಿದ್ಯಾಲಯ, ಶಿವಮೊಗ್ಗ

UNIVERSITY OF AGRICULTURAL AND HORTICULTURAL SCIENCES, SHIVAMOGGA

Directorate of Postgraduate Studies

**Programme of Research**

1. Name of the Student :
- ID No. :
2. Year of Admission :
3. Degree Programme :
4. Major Subject :
5. Title of the Research Programme :

(**Bold** / *Italics* / Underline wherever necessary)

6. Objectives of Investigation:

1.

2.

3.

4.

5.

P.T.O.

7. Brief Review of Work:

**(Bold/ Italics/ Underline wherever necessary)**



8. Detailed Programme of work

Give complete details of field experiment/methodology to be adopted in lab incubation studies, including statistical design/ survey work, observations to be recorded *etc.*)

**(Not exceeding four pages)**

(**Bold**/ *Italics*/ Underline wherever necessary)







9. Collaboration with other Departments / Institutions / Organizations and Fellow Scientists:

10. Special features/practical utility of the investigation



Date:  
Email. Id:  
Mob. No:

Signature of the Student

Date:  
Email. Id:  
Mob. No:

Signature of the Chairperson

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

Date:

Signature of the  
Head of the Department

Forwarded to Dean (PGS), UAHS, Shivamogga for further needful.

Date:

Dean (Hort.)/Dean (Forestry)/  
Technical Officer, Dean (PGS)

Remarks of Dean (PGS)

Approved

Dean (PGS)

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NB: Please submit four copies of Form No. 4.

No. Dean (PGS)/UAHS/Form-2, 3 & 4/\_\_\_\_\_/\_\_\_\_\_

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

To,

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