



Proposal Resubmission Form

This form must be completed to resubmit the proposal.

Scholar Name:	Student Number:
Email ID:	Contact Number:
Supervisor Name:	Supervisor Approved by DPC on:
Area of Specialization:	Final Date of Degree Completion:
Previous Research Topic:	

Proposal Presented before the DPC on:

DPC Observation(s)	Action(s) Taken

New Research Topic (if changed):

Important Points of
the Revised Proposal:

I declare that I have addressed all the observations of IER-DPC

Student signature:

Date:

Recommendation of the Supervisor

Supervisor Name:

Does this proposed research has the potential to be aproved? Yes No

Comments:

Supervisor Signature:

Date:

*Only typewritten form will be accepted | Use Adobe reader to fill the form | Digital signatures are also accepted.