ACADEMIC-GRADUATE STUDIES AND RESEARCH DIVISION SECOND SEMESTER 2022-2023

Outline of the Course

(To be filled in consultation with the proposed supervisor*)

| Course No.: BITS E593/E594 | Course Title: Reading Course-I/II |
|--|-----------------------------------|
| Name of the Instructor (Supervisor): | |
| Name of the Student: | ID No: |
| Topic of the course work: | |
| Aim and Scope of the Study: | |
| | |
| Plan of Work: | |
| | |
| | |
| Text Book(s) identified for the Study: | |
| Chamber Consultation day and hour of the Sup | ervisor: |
| Notices: All notices concerning the course will be a Board. | |
| Student's Signature | Approved/Disapproved |
| Date: | Signature of the instructor |

*The registered student must submit duly filled above outline after verification from his/her supervisor to the **Convener**, **DCA** latest by **Feb 04**, **2023**.



ACADEMIC-GRADUATE STUDIES AND RESEARCH DIVISION

SECOND SEMESTER 2022-2023

MID SEMESTER EVALUATION FORM

| Course No.: BITS E593/E594 | Course Title: Reading Course-I/II |
|--|-----------------------------------|
| Name of the Instructor (Supervisor): | |
| Name of the Instructor In-charge: Associate Dean AGS | SRD |

| S. No. | Name and ID No. of the Student | Test-1 (10 Marks) | Test-2 (15 Marks) | Seminar/ Assignment (15 Marks) | Mid sem Total (40 Marks) | Recommended Mid sem Grade |
|-----------|--------------------------------------|----------------------|----------------------|--------------------------------------|-----------------------------------|---------------------------------|
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |

Please complete the above evaluations and return duly filled copy of this proforma to the **Convener**, **DCA** latest by **Mar 25**, **2023**.

Signature of Instructor





ACADEMIC-GRADUATE STUDIES AND RESEARCH DIVISION SECOND SEMESTER 2022-2023

FINAL EVALUATION FORM

| Course No.: BITS E593/E594 | Course Title: Reading Course-I/II |
|--|-----------------------------------|
| Name of the Instructor (Supervisor): | |
| Name of the Instructor In-charge Associate Dec | on AGSRD |

| S. No. | Name and ID No. of the Student | Mid Sem Total (40 Marks) | Test-3 (15 Marks) | Seminar/ Assignment (15 Marks) | Comprehensive (30 Marks) | Final Total (100 Marks) | Recommended Final Grade |
|-----------|--------------------------------------|-----------------------------|----------------------|--------------------------------------|-----------------------------|----------------------------------|----------------------------|
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |
| 4. | | | | | | | |

Please complete the above evaluations and return duly filled copy of this proforma to the **Convener**, **DCA** latest by **May 17**, **2023**.

Signature of Instructor

