

## WAYAMBA UNIVERSITY OF SRI LANKA

## PROGRESS REPORT FOR POSTGRADUATE STUDENTS

[Only for Research Degrees]

Degree Registered : Ph.D	)	M.Phil.	
Mode : Full-	Time	Part-Time	
Period Covered : FRO	<b>M</b> // 20	то// 20	
Progress Report No:			
The Section A and B mu supervisor/s:	st be completed by	the <u>STUDENT</u> and handed or	ver to his/her
Section A:			
Name and Initials			
Registration No.			
Date of Registration	Day:	Month:	Year:
Registered Faculty	Agriculture & Plantation Management	Livestock, Fisheries 8 Nutrition	k
	Applied Sciences	Medicine	
	Business Studies & Finance	Technology	
Registered Department			
Field of Study			
Section B: Brief description	of the work done duri	ing the period	
Title of the Thesis:			
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concern (i.e. methods approbtained etc.)  Limit your expression	olied such as field/lab	he work completed during to work, collection and analysis of ords urpose, please include your Name	of data, results

the Date AND the Signature of your Supervisor/s for your write-up

Publications / Communications arising from the project <u>during the reporting period</u>	Available (Attach Copies)	Not Available
(Please tick "X" in appropriate box)		
Any other Remarks:		
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Date: // 20		
	Signature of the Si	cudent

## <u>Section C:</u> Observation by the <u>SUPERVISOR/S</u> (If there are more than one Supervisor at least <u>two</u> Supervisors should give their comments)

	1 <sup>st</sup> Su	pervis	or	2 <sup>nd</sup> Supervisor			3 <sup>rd</sup> Supervisor		
	Prof. / Di	r. / Mr.	/ Mrs.	Prof. / Di	r. / Mr.	/ Mrs.	Prof. / Dr	. / Mr. /	/ Mrs.
Name of Supervisor									
Recommendation (Please tick "X")	Excellent	Good	Poor	Excellent	Good	Poor	Excellent	Good	Poor
Research work									
Attendance at discussions / seminars									
Research publications									
Thesis preparation									
Enthusiasm									
Remarks on the Progress									

Signature			
Date (DD / MM / YY)	/ /20	/ /20	/20
Official Stamp			

## <u>Section D</u>: Recommendation of the Faculty Higher Degrees Committee

C: t CCI :				
Signature of Chairman				
Faculty Higher Degrees Committee				
Date (DD / MM / YY)	Day	Month	Year	

ANNEX: The work comp work, collection and an			se appired eden	
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