

**Hope Foundation's**  
**International Institute of Information Technology, Pune**  
**PROJECT REVIEW – III**  
(Academic Year: 2025-26)

<b>Group ID :</b>	BIA-01	<b>DATE :</b>	2025-10-06
<b>Project Title :</b>	Maratha Warfield Weapons Classification using Vision Transformer		

Sr.No.	Roll No.	Student Name	Contact Details	Internal / External Guide Details
1	BIA61	Abhishek patil	9356141975.0	Guide Name : Dr. Jyoti Surve Mentor Name: Mentor Mobile No. & Email :
2	BIA62	Pratiksha Sathe	8010951135.0	
3	BIB28	Akshay Lakwal	8530485360.0	
4	BIB62	Aditya Sonar	9322349860.0	

REVIEW – III CHECKLIST : IMPLEMENTATION			25 MARKS
<b>IMPLEMENTATION</b>			
1. Does the code completely and correctly implement the design?			<b>Y</b>
2. Does the code comply with the Coding Standards?			<b>N</b>
3. Is the code well-structured, consistent in style, and consistently formatted?			<b>Y</b>
4. Does the implementation match the design?			<b>N</b>
5. Are all functions in the design coded?			<b>Y</b>
<b>DOCUMENTATION</b>			
6. Is the code clearly and adequately documented?			
7. Are all comments consistent with the code?			<b>Y</b>

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**STUDENT PERFORMANCE EVALUATION**

Students' Contribution and Performance				
	Marks(25M)			
	Group Members			
Particulars	1	2	3	4
1.1. Detailed study of Algorithm(s) / Model / Hardware specification (As applicable)	Y	Y	Y	N
2.2. Confirmation of Data set used (As applicable)	Y	Y	Y	N
3.3. 50% Implementation (10M)	5	5	5	0
4.4. Partial results obtained (7M)	5	5	7	0
5.5. Presentation skills (4M)	4	4	4	0
6.6. Question and Answer (4M)	4	4	4	0
7.7. Summarize the methodologies/Algorithms implemented / to be implemented	N	N	N	N
<b>Total(25M)</b>	<b>18</b>	<b>18</b>	<b>20</b>	<b>0</b>

**Comments (if any) :**

# To be filled by internal guide & reviewer(s) only.

\* Whether the presentation / evaluation schedule. : YES / NO (If NO mention the reasons for same.)

**Review – III: Deliverables**

- Detailed Study (System deviation)
- 50% of code implementation
- Some Experimental Results
- Project Plan 3.0

**Name & Signature of evaluation committee -**

Name of Reviewer 1

Name of Reviewer 2

Name of Internal Guide