## PROFORMA FOR FURNISHING REVIEW STATUS OF PROJECTS / CONSULTANCY ASSIGNMENT

1. Title of the project & No.		:		
2. Department / Centre		:		
3. Principal Investigator		:		
4. Co-Investigator(s)		:		
5. Sponsoring Agency		:		
6. Value of project		:		
7. Date of commencement		:		
8. Closure date		:		
	First	Second	Third	Fourth
Date				
Venue				
Recommendation s of the Review Committee				
9. Extension, if any 10. Review meeting				
11. If Review meets project has been ass	ings are not held, please essed	e state how the satisfact	cory progress / completi	on of the
12. Any other remark	rks :			
		-		
		Signa	ature of the Principal Inv	vestigator
		Na	me:	
Date:				
Encl: Relevant com	munications / Minutes			