



**Feedback of the Research Advisory Committee:**

Recommended:  Not Recommended:  (Notes, if any) .....

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**Research Advisory Committee Members (Full signature, department and designation):**

Chairperson (HOD /Nominee) : .....

Subject Expert : .....

Subject Expert : .....

Supervisor (Convener) : .....

Co-Supervisor : .....

----- **For Office Use Only** -----

Registration fee is paid in full: Yes  No

Number of half-yearly report(s) / RAC Report submitted: .....

Full Signature with date:

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Comments by Dean, FCA / Secretary, FCA, if any:

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**Direction by Dean (F.C.A) / V.C.**

First / Second / Third / Special extension / Maternity leave for 1 year / \_\_\_\_\_ Months/\_\_\_\_\_ Days is approved,  
*subject to ratification by the Doctorate Committee (Arts):*

For consideration of Doctorate Committee (Arts):