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**CHHATRAPATI SHAHU MAHARAJ RESEARCH, TRAINING AND HUMAN  
DEVELOPMENT INSTITUTE (SARTHI), PUNE**  
*(An Autonomous Institute Of Government Of Maharashtra)*  
(Email- [cmsrf2019phd@gmail.com](mailto:cmsrf2019phd@gmail.com) / [cmsrf2019mphil@gmail.com](mailto:cmsrf2019mphil@gmail.com))

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**HALF YEARLY PROGRESS REPORT**

Jan 20 To Jun 20  
Jul 20 To Dec 20

1. Name of the Fellow:
2. Name of the Fellowship: Chief Minister Special Research Fellowship (CMSRF)-2019
3. Year of the Fellowship:
4. Date of Award letter: \_\_\_\_/\_\_\_\_/\_\_\_\_
5. M.Phil / Ph.D./ Integrated :
6. Subject:
7. Topic / Title of Research:
8. Date of Registration: \_\_\_\_/\_\_\_\_/\_\_\_\_
9. Name of the Guide/Supervisor:
  - i. Email ID of Guide/Supervisor:
  - ii. Mobile No.
10. Period of Progress Report from \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

(Signature of Guide)

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

(Signature of Head of Department)

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

11. Number of days the Fellow remained present at the University/  
Institution/ College. (Please Attached Xerox copy of Attendance sheet  
of every Months. Signed by Guide & HoD /Principal)

12. Number of days the Fellow remained out of station for field work /  
travel with dates and place visited:

Sr. no.	Type of Field work Done	Details	Remarks of Guide
	1. Places visited 2. Respondents contacted		

3. Conferences / Seminars attended on relevant subject:

Sr. no.	Title of Paper	Venue	Status (International, National, State)

4. Chapters Completed:

Sr. no.	Chapter Title	Completed or Under Completion	Status	Remarks of Guide
			1. Rough Draft 2. Approved 3. Final Typing	

(Signature of Guide)

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

(Signature of Head of Department)

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

5. Title of the article / paper published during the period underreport:

Sr. no.	Paper / Article's Title	Whether Published / or Not	Name of journal / Magazine & Vol. No.	Place

(Please enclose reprint of each)

6. Comments of the supervisor / Guide on the progress of the research work during the period under report. (A short report of the work done in 500 words, if needed a separate sheet can be attached ) :

Also certified that fellow shall not accept / hold any emoluments paid or otherwise or receive emoluments, salary, stipend, etc. from any other source during the tenure of the award.

If, as a result of check or audit objection, some irregularity is noticed at a later stage, action will be taken to refund, adjust or regularize the objected amount.

Signature

Date :

**Name of the Candidate :**

Signature

Name :

Date :

**Guide/ Supervisor :**

Signature

Name :

Date :

**Head of Department (Seal) :**

Signature

Name :

Date :

**Registrar / Director /Principal :  
(Seal of University / Institution / College)**