

# FINAL YEAR PROJECT PRE-REGISTRATION FORM

Semester \_\_\_\_\_

Reg#: \_\_\_\_\_ Student Name: \_\_\_\_\_  
Program: \_\_\_\_\_ Specialization: \_\_\_\_\_  
CGPA: \_\_\_\_\_ No. of Courses Passed: \_\_\_\_\_  
Project ID: \_\_\_\_\_ Day/Date: \_\_\_\_\_  
Passed: MBR  ARM

Please mention below the elective course(s) that you have passed:

- Course-1: \_\_\_\_\_
- Course-2: \_\_\_\_\_
- Course-3: \_\_\_\_\_
- Course-4: \_\_\_\_\_

Proposed Research Topics:

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_

**Note:** The topics are only proposed. Your topic will only be finalized by the supervisor after the project classes will begin. The student must remember that the supervisor may modify or even completely change your topic. You are required to provide topics now, instead of later, to help you narrow down your focus.

**Approved for Registration**  **Not Approved for Registration**

\_\_\_\_\_  
**<sup>1</sup>Project Coordinator**

\_\_\_\_\_  
**Director CoMS**

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Registration Officer**

<sup>1</sup> Student's eligibility in project to be verified by Project Coordinator before getting approval from the Director CoMS.

## **UNDERTAKING**

**I understand and acknowledge the following:**

1. I will finish the thesis before the end date mentioned on the project guidelines.
2. I understand that if I am unable to have my thesis approved within the specified time period, I will be required to redo my thesis work from scratch.
3. I understand that the responsibility of finishing this thesis in time is my responsibility and not my supervisor's.
4. I certify that I will adhere to the highest moral and ethical standards and will not resort to plagiarism whether intentional or unintentional.
5. The Institute has the authority to reject my thesis if it fails on plagiarism tests performed by the Plagiarism Committee of College of Management Sciences.
6. A student must obtain more than 60% marks in phase-I to proceed to phase-II. Failing this the student will be required to repeat phase-I of the project.
7. I, also, understand that all the Plagiarism policies by the Higher Education Commission are applicable to my thesis.
8. I understand that if I need to skip a semester during the thesis for any personal reason, I will inform the College in writing before the start of that semester.
9. I understand that I will need to keep copies of all approvals.

---

**Student Signature**

**COLLEGE OF MANAGEMENT SCIENCES**

**FINAL YEAR PROJECT**  
**PHASE 1 - STUDENT GRADING & PERFORMANCE REVIEW**  
**SEMESTER \_\_\_\_\_**

Reg #		Student Name	
Program		Supervisor Name	
Phase-1 CID		Specialization	

Research Title: \_\_\_\_\_

\_\_\_\_\_  
 Student Signature

\_\_\_\_\_  
 Date

<b>Deliverable -1 (Project Proposal &amp; Proposal Defense)</b>		Pass <input type="checkbox"/>	Fail <input type="checkbox"/>
HoD / Project Evaluator Marks	/10	Similarity Index %	
Remarks:			
_____			
_____			
_____			
HoD / Project Evaluator Signature & date:			

Deliverables	Supervisor Marks	HoD/ Project Evaluator Marks	Marks Obtained	Similarity Index %
Deliverable 2 : Introduction (15 Marks)	/ 7.5	/7.5	/15	
Deliverable 3 : Literature Review (20 Marks)	/10	/10	/20	
<b>Total Marks obtained in Phase-1</b>			/45	

**Supervisor Remarks**

Recommended for Final Year Project Phase -2		Yes		No
Remarks:				
_____				
_____				
_____				
Supervisor Signature & date:				

**HoD / Project Evaluator Remarks:**

Recommended for Final Year Project Phase -2		Yes		No
Remarks:				
_____				
_____				
_____				
HoD / Project Evaluator Signature & date:				

**COLLEGE OF MANAGEMENT SCIENCES**

**FINAL YEAR PROJECT**  
**PHASE 2 - STUDENT GRADING & PERFORMANCE REVIEW**  
**SEMESTER \_\_\_\_\_**  
**PHASE-2 CID \_\_\_\_\_**

Deliverables	Supervisor Marks	HoD/ Project Evaluator Marks	Marks Obtained	Similarity Index
Deliverable 1 : Methodology (10 Marks)	/ 5	/ 5	/10	
Deliverable 2 : Result & Discussion (10 Marks)	/5	/5	/10	
Deliverable 3 : Conclusion (10 Marks)	/5	/5	/10	
Final Submission (15 Marks)	/ 7.5	/ 7.5	/15	
<b>Total Marks Obtained in Phase-2</b>			<b>/45</b>	

Supervisor Remarks				
Recommended for Final Year Project Exhibition	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Remarks:				
_____				
_____				
_____				
Supervisor Signature & date:				

HoD / Project Evaluator Remarks				
Recommended for Final Year Project Exhibition	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Remarks:				
_____				
_____				
_____				
HoD / Project Evaluator Signature & date:				

Final Result	Marks Obtained
Phase-1	/45
Phase-2	/45
Poster	/5
Presentation	/5
Total Marks	/100
Grade	

\_\_\_\_\_  
Project Coordinator

\_\_\_\_\_  
HoD/ Project Evaluator

\_\_\_\_\_  
Director CoMS