



GAZIPUR AGRICULTURAL UNIVERSITY (GAU)  
Gazipur1706

## STATUS OF STUDENT IN GRADUATE PROGRAM

Name (Major Professor) and Designation:  
Department:

Sum	Aut	Win	Term .....
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Number of Students Under Your Supervision.....

Number of Students Served as Advisory Committee Member.....

SL. No.	Name of Students	Registration No.	Program	Term of Admission	Term of Advisory Committee Formation	Term of Qualifying Exam. held	Program of Study Submission in Term	Student's Research Status in Current Term	Remarks
1.									
2.									
3.									
4.									
5.									
6.									
7.									
8.									

NB: For insufficient space use extra sheet.

Total Number of Student in Your Department:.....

Signature of the Major Professor:

Signature of the Head of the Department: