



Comprehensive Oral Examination (CORe)

1. Name of the Student, Mobile No. :
2. Roll Number :
3. Category : PhD (Regular HTRA / Project / External)
4. Date of Joining / Registration :
5. Name of Research Supervisor(s) :
6. Whether the candidate has passed the requirements of course work and written part of the Comprehensive Exam : Yes/No
7. Date of Comprehensive Oral Examination :
8. Comprehensive Oral Examination Committee

Chairman, DC	
Research Supervisor(s)	
Internal Member, DC	
Internal Member, DC	
Internal/External Member, DC	
Examiner-1	
Examiner-2	

9. Travel (for External Member(s)) : Institute arrangement / Reimbursement

If the Institute arrangement is required, kindly provide the following:

Name of the Member	Time		Address	Mobile No.	Landline No.
	Pickup	Drop			

10. Honorarium for External Member(s) :

Signature of the
Student

Signature of the
Research Supervisor

Signature of the
Research Coordinator

Signature of the
Chairman

OFFICE

For arrangements and financial sanction (Approved / Not Approved)

Director

JR (Acad.)

1. Academic Section
2. Accounts section
3. Personal File