



SUBMISSION OF THESIS BY THE Ph D SCHOLAR FOR EVALUATION

Name of the Scholar : _____ Roll No. : _____

Department : _____

Date of Enrolment : _____ Date of Registration : _____

Title of the thesis :

I hereby submit my thesis to the Institute for consideration and award of

Ph. D. Degree

- Encl : (1) 4 copies of thesis
(2) A copy of the thesis in electronic media (in PDF format)
(3) Report of Guide(s)

Date

Signature of Scholar

Recommended for acceptance for the purpose of evaluation.

Guide(s)

Chairman, DC

Head of the Department

To

The Dean Academics