

**वैज्ञानिक और नवीकृत अनुसंधान अकादमी**

**ACADEMY OF SCIENTIFIC AND INNOVATIVE RESEARCH**

**PROPOSED EXAMINERS FOR ph.d THESIS**

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| **Name of the Candidate** |  |
| **Registration No.** |  |
| **Faculty** |  |
| **Institute** | **CSIR-** |
| **Title of the Thesis** |  |
| **Supervisor/**  **Co-Supervisor (if any)** |  |

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| --- | --- | --- | --- | --- |
| **Sl. No.** | **Name, Designation, Address and Contact Details of the proposed Examiners** | **Broad area of expertise** | **Recommendation of Dean** | **Comments of Senate Chairman** |
| 1 |  |  | Ex- | Ex- |
| 2 |  |  | Ex- | Ex- |
| 3 |  |  | Ex- | Ex- |
| 4 |  |  | Ex- | Ex- |
| 5 |  |  | Ex- | Ex- |
| 6 |  |  | Ex- | Ex- |
| 7 |  |  | Ex- | Ex- |
| 8 |  |  | Ex- | Ex- |

**Ex-: Examiner Number Note: Signatures of Guide and the Coordinator on all pages mandatory**

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Supervisor Coordinator

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