



**Format for approval of Title of Thesis / Dissertation of Post-graduate
 Studies
 Ph.D.**

Name of the student _____ Regn. No. _____

Class: _____

Major Subject _____

Allied Subject: (i) _____

(ii) _____

ADVISORY COMMITTEE (Ph.D.)

	Name of Committee Member	Designation	Division	Signature with date
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	Advisor (Allied Discipline)			
5	_____	_____	_____	_____
	Advisor (Allied Discipline)			
6	_____	_____	_____	_____
	(Director's Nominee)			

Title of the research problem:

Objectives of Investigation:

A brief resume of work done in India and Abroad:
(Pl. attach separate sheet)

Technical programme of work (including location of place of work, facilities available, etc.):

(Semester-wise / Month-wise, Pl. attach separate sheet)

Collaboration with other Divisions / Institutes (specify details):

Bibliography (Pl. attach separate sheet):

Forwarded in quadruplicate, to the Joint Director (Academic), for its approval by the Synopsis Approval Committee.

Signature of the Head of
Division with Seal

Approved

Joint Director (Academic)

