

Panel of Examiners for Thesis Evaluation and Viva-Voce Examination

1. Name of the student:
2. Admission No.:
3. Major Field:
4. Minor Field:
 - 1.
 - 2.
5. No. & date of the approval of the Programme of study:
6. No. & date of the approval of the Subject of Thesis:
7. Title of the Thesis:
8. Date of successful completion of the comprehensive examination:
9. Likely date of submission of thesis:
10. Panel proposed by the Major Advisor:

<u>Si. No.</u>	<u>Name</u>	<u>Address</u> <u>(including contact number & email-id)</u>	<u>Field of Specialization</u>
1			
2			
3			

11. Panel recommended by the Head of the Department with addition, if any:

<u>Si. No.</u>	<u>Name</u>	<u>Address</u> <u>(including contact number & email-id)</u>	<u>Field of Specialization</u>
1			

Certified that the above panel is in accordance with the Academic Regulation 7.14.1 governing Appointment of External Examiner.

Signature of the Head of the Department

Dated:

Endst. No.

Forwarded to the Director, Resident Instruction-cum-Dean, Postgraduate Studies, BASU, Patna for information & necessary action please.

Head of the Department