

Indian Institute of Technology Guwahati

FORM-14: PANEL OF PhD THESIS EXAMINERS

APPOINTMENT OF EXAMINERS

SUBMISSION OF SYNOPSIS OF THE THESIS

TITLE OF THE PhD THESIS:

Name of the PhD Stude	nt Roll Number	Department/ Center
The	sis Supervisor(s)	Date of Synopsis Seminar
Coordinating		

Supervisor : CERTIFICATE

Supervisor :

I/we certify that the persons proposed as examiners are actively engaged in research in the field of work of the thesis and are eligible as per the PhD Ordinance of the Institute. That the work carried out by the student is original and satisfactory. We further certify that none of the persons are co-authors with any of us in any paper published with the content of this thesis work.

Signature of the Coordinating Supervisor (with date)

Signature of Supervisor (with date) (if there is a supervisor)

Enclosures:

- 1. Proposed panel of thesis examiners
- 2. Copies of synopsis one hardcopy and pdf file in a CD

Forwarded to the Chairperson, IPPC

Date:

Signature of the Chairperson, DPPC/ CPPC

Chairman Senate may appoint the examiners for the above mentioned PhD student.

Date:

Signature of the Chairperson, IPPC

CONFIDENTIAL

The following are the PhD thesis examiners (Abroad and INDIA)

Sr. No.	Examiners from ABROAD	In order of Priority *	Sr. No.	Examiners within INDIA	In order of Priority *
1.			5.		
2.			6.		
3.			7.		
4.			8.		

* The order of priority is to be assigned by the Chairman Senate

Signature of the Chairman, Senate

Date:

List of Examiners Recommended by the Doctoral Committee

EXAMINERS FROM ABROAD

1.						
Name:						
Designation:						
Department:						
Institute						
Address:						
Telephone:				Fax:		
Email:				Url:	http://www.	
Mobile Phone:						
Research profile	and justification	on for recom	mendation (be	low in br	rief):	

2.					
Name:					
Designation:					
Department:					
Institute:					
Address:					
Telephone:			Fax:		
Email:			Url:	http://www.	
Mobile Phone:					
Research profile	and justification	for recommendati	on (belo	ow in brief):	

3.				
Name:				
Designation:				
Department:				
Institute:				
Address:				
Talanhana			Fax:	1
Telephone:				better (/,
Email:			Url:	http://www.
Mobile Phone:				
Researchprofil	e and justification	for recommendation	(below in	n brief):
4.				
Name:				
Designation:				
Department:				
Institute:				
Address:				
Telephone:			Fax:	
Email:			Url:	http://www.
Mobile Phone:				
Research profil	e and justification	for recommendation	(below in	h brief):

EXAMINERS WITHIN INDIA

5.			
Name:			
Designation:			
Department:			
Institute:			
Address:			
Telephone:		Fax:	
Email:		Url:	http://www.
Mobile Phone:			
Research profile	e and justification for recommendation	on (below in	brief):
_			
6. Name:			
Designation:			
Department:			
Institute:			
Address:			
Talaahaaaa			
Telephone:		Fax:	
Email:		Url:	http://www.
Mobile Phone:			
Research profile	e and justification for recommendation	on (below in	brief):

7.						
Name:						
Designation:						
Department:						
Institute:						
Address:						
Telephone:				ax:		
Email:				Url:	http://www.	
Mobile Phone:						
Research profi	le and justific	ation for reco	mmendation (belo	ow in	brief):	

8.

8.					
Name:					
Designation:					
Department:					
Institute:					
Address:					
Telephone:			Fax:		
Email:			Url:	http://www.	
Mobile Phone:					
Research profile	e and justification	for recommendation	(below in	h brief):	

NAME AND SIGNATURES OF THE DOCTORAL COMMITTEE MEMBERS

SI.No.	Name	Doctoral Committee	Signature
1.		Chairperson	
2.		Member	
3.		Member	
4.		Member (Coordinating Supervisor)	
5.		Member (Supervisor)	