## CHECK SHEET FOR COMPREHENSIVE EXAMINATION

[To be used by the Comprehensive Examination Board. This should be returned to Assistant Registrar (Academic) after completion]

Name of the Candidate				
Degree Registered				
Department and SR No. and date of Joining				
Date and Place of CE (Second CE only if recommended by First CE Board)	First			
	Second			
We recommend the following (Tick the appropriate Box with $\sqrt{}$ )				
Student has passed the Comprehensive Examination				
Student has failed in first CE. The CE Board also	Second CE is not required			
recommends	Appear for Second CE			
Student has to be downgra	aded to M.S	S / M.Sc (Engg.)		
Student has failed in the S Examination	econd Con	nprehensive		

Sl. No.	Name of the CE Board Members	Signature