List of Examiners

This is the list for Examiners for examination of the thesis (for the award of the degree Ph.D.) submitted by the following candidate under my supervision:

Name of the Research Scholar:

Name of the Supervisor:

Title of the Thesis:

1. Name of the Examiner: Institution: Designation: Specialization: Consent taken: (Yes/No) Phone Number: E-mail: Status (√): External Examiner ( ) /Supervisor ( ) /Co-supervisor ( ) / Authorized Person ( )	Address: Street Address: City: State: Country: Postal / Zip Code:
2. Name of the Examiner: Institution: Designation: Specialization: Consent taken: (Yes/No) Phone Number: E-mail: Status (√): External Examiner ( ) /Supervisor ( ) /Co-supervisor ( ) / Authorized Person ( )	Address: Street Address: City: State: Country: Postal / Zip Code:
3. Name of the Examiner: Institution: Designation: Specialization: Consent taken: (Yes/No) Phone Number: E-mail: Status (√): External Examiner ( ) /Supervisor ( ) /Co-supervisor ( ) / Authorized Person ( )	Address: Street Address: City: State: Country: Postal / Zip Code:
4. Name of the Examiner: Institution: Designation:	Address: Street Address:

Specialization: Consent taken: (Yes/No) Phone Number: E-mail: Status (√): External Examiner ( ) /Supervisor ( ) /Co-supervisor ( ) / Authorized Person ( )	City: State: Country: Postal / Zip Code:
5. Name of the Examiner: Institution: Designation: Specialization: Consent taken: (Yes/No) Phone Number: E-mail: Status (√): External Examiner ( ) /Supervisor ( ) /Co-supervisor ( ) / Authorized Person ( )	Address: Street Address: City: State: Country: Postal / Zip Code:
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8. Name of the Examiner: Institution: Designation: Specialization: Consent taken: (Yes/No)	Address: Street Address: City: State:

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Note:

1. **Please note that only one examiner is to be listed from one Institution.**
2. **After filling it up digitally, please convert this word file into a .pdf file, and then upload in the form provided in the web-link.**