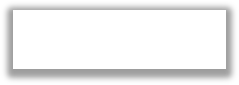
**LIST OF EXAMINERS (INDIA) FOR EVALUATION OF Ph.D. THESIS**



**FORM -11**

**July 2021**

1. **Name of the Scholar: Registration No.:**
2. **Title of the Thesis:**

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| **Sl. No.** | **Contact Details** | **Number** | **Recommendation of the Chairman, Senate** |
| **1** | Name:  Designation:  Department:  Name of the organization:  Complete postal address with PIN code  Contact Phone No.:  E-mail:  Webpage: |  |  |
| 2 | Name:  Designation:  Department:  Name of the organization:  Complete postal address with PIN code  Contact Phone No.:  E-mail:  Webpage: |  |  |
| 3 | Name:  Designation:  Department:  Name of the organization:  Complete postal address with PIN code  Contact Phone No.:  E-mail:  Webpage: |  |  |
| 4 | Name:  Designation:  Department:  Name of the organization:  Complete postal address with PIN code  Contact Phone No.:  E-mail:  Webpage: |  |  |
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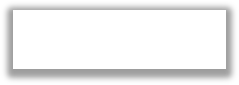
\* **Times the Examiner Examined Thesis Supervised by the Present Supervisors Earlier**

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**Endorsement by the DSC members**

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| --- | --- | --- | --- |
| **Sl. No.** | **Name of the DSC Member** | **Role** | **Signature with date** |
| 1. |  | Supervisor /(s) |  |
| 2. |  | Supervisor /(s) |  |
| 3. |  | Member |  |
| 4. |  | Member |  |
| 5. |  | Member |  |
| 6. | **CHAIRPERSON, DSC** | | |

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**Endorsement by the DSC members**

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| --- | --- | --- | --- |
| **Sl. No.** | **Name of the DSC Member** | **Role** | **Signature with date** |
| 1. |  | Supervisor /(s) |  |
| 2. |  | Supervisor /(s) |  |
| 3. |  | Member |  |
| 4. |  | Member |  |
| 5. |  | Member |  |
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