REPORT ON VIVA-VOCE & DEFENSE FOR Ph.D. DEGREE

 **FORM - 14**

**March 2024**

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1. **Name of the Scholar: Roll No.:**
2. **Department / Branch: Date of Admission/Enrollment:**
3. **Registration No.: Date of Registration:**
4. **Date of Submission of Thesis:**
5. **Title of the Thesis:**
6. **Date of Defense Seminar Presentation & Viva-Voce:**
7. **Total No. of papers published/accepted for publication in SCI/SSCI/AHCI/Scopus/Web of Sc. journals: SCI: SSCI: AHCI: Scopus: Web of Science:**
8. **No. of papers presented in conferences/seminars (enclosed the presentation certificate):**
9. **Whether the modification/Correction (if any) as suggested by External Examiners have been incorporated and modified version of the thesis submitted:**
10. **Recommendation:**
11. **Performance (Please attach additional sheet for any comments, if required):**
12. **B1. Degree, if recommended, to be awarded (Yes/No): B2. Ph.D., Department of \_.**
13. **Endorsement by the Members of the Board of Examiners (Defense & Viva-Voce):**

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

**Dean (Academic)**

**March 2024**

 **FORM - 15**

**FORMATION OF THE COMMITTEE FOR Ph.D DEFENSE SEMINAR**

**[*The filled up soft copy in word format must be sent from the Institute email address of Chairman, DSC / Supervisor to Dean (Academic) only*].**

1. **Name of the Scholar: Roll No.:**
2. **Department / Centre: Date of Admission/Enrollment:**
3. **Registration No.: Date of Registration:**
4. **Date of Submission of Thesis:**
5. **Title of the Thesis:**
6. **Date of Submission of the Compliance report:**
7. **Proposed Date of Defense Seminar: Mode: Offline / Hybrid**

Supervisor(s):

|  |  |  |
| --- | --- | --- |
| Name | Department | E-mail address |
|  |  |  |
|  |  |  |

Members of the DSC:

|  |  |  |
| --- | --- | --- |
| Name | Department | E-mail address |
|  |  |  |
|  |  |  |
|  |  |  |

Chairman DSC:

|  |  |  |
| --- | --- | --- |
| Name | Department | E-mail address |
|  |  |  |

External Examiner (For Ph.D Defense Only):

|  |  |  |
| --- | --- | --- |
| Name | Affiliation | E-mail address |
|  |  |  |

Additional attendee (at least three): (Faculty/Research scholar from the same or other Department)

|  |  |  |
| --- | --- | --- |
| Name | Affiliation and Department | E-mail address |
|  |  |  |
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|  |  |  |
|  |  |  |

(Signature of the Supervisor(s) with date)

(Signature of the CHAIRPERSON, DSC with date)