



INDIAN ASSOCIATION FOR THE CULTIVATION OF SCIENCE

(A Deemed to be University under the de novo category)

2A & 2B, Raja S.C. Mullick Road, Jadavpur, Kolkata 700 032. India

Telephone: (91) 33 24734971, Fax: (91) 33 2473-2805,

Proforma for Panel of Examiners for adjudicating the Ph.D Thesis

Name of the Candidate:

(in Block Letter)

Name of the School:

Ph.D. Registration No. with Date:

Proposed Date of Thesis Submission:

Title of the Thesis:

(in Block Letter)

**PLEASE SUBMIT AT LEAST 6 (SIX) NAMES OF
INTERNATIONALLY RENOWNED EXPERTS IN THE FIELD
(FROM INDIA AND ABROAD WHILE AT LEAST 3 OF THEM
SHOULD BE FROM INDIA)**

• Details of Examiners:

1. Full Name:

Designation and institutional affiliation:

Postal Address with PIN code

Email Id..... Telephone Number_____

2. Full Name:

Designation and institutional affiliation:

Postal Address with PIN code

Email Id..... Telephone Number_____

3. Full Name:

Designation and institutional affiliation:

Postal Address with PIN code

Email Id..... Telephone Number_____

4. Full Name:

Designation and institutional affiliation:

Postal Address with PIN code

Email Id..... Telephone Number_____

5. Full Name:

Designation and institutional affiliation:

Postal Address with PIN code

Email Id.....

Telephone Number_____

6. Full Name:

Designation and institutional affiliation:

Postal Address with PIN code

Email Id..... Telephone Number_____

Submit the Synopsis along with this form in sealed envelope separately (Send a soft copy of the synopsis to the PhD Co-coordinator).

Signature of Co-Supervisor & Seal

Signature of Supervisor & Seal