### Format for Panel of M. Sc Thesis Evaluation

**Department ………………………………**

**College ………………………………..**

**Dean,**

**Post Graduate Studies**

The following-panel of external examiners is suggested for thesis evaluation and conduct of viva-voce as per particulars given below.

Name of Student ……………………………… I.D. No. ………………….. Title of degree …………………..M.Sc. Major…………………………………...… Minor………………….

Thesis title ……………………………………………………………………………........

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……………………………………………………………………………………………..

Tentative period of thesis submission (week)-

External Examiners:

1 ………………………………………………………………………………………

………………………………………………………PIN…………………………

Phone……………………………………Email-………………………………………...

2 ………………………………………………………………………………………

………………………………………………………PIN…………………………

Phone……………………………………Email-………………………………………...

3 ………………………………………………………………………………………

………………………………………………………PIN…………………………

Phone…………………………………Email-………………………………………...

**Signature of Advisor**

1 Certified that the experts in the field of research of the student as suggested S.L. No………………….. above are not available in U.P. or in the states adjoining.

2 Certified that the above panel does not contain the names of the examiner who has conducted the oral preliminary exam of the student (in case of Ph.D. thesis only)

**Head of the Department**

**Forwarded to Dean PGS,**

**Signature of Dean of the College**

*Please see overleaf*

The request is in order and forwarded to nominate the name of examiner.

**Dean, PGS**

Agreed & Dr……………………………………….be requested for evaluation.

**Vice-Chancellor**

Consent of the above examiner has been received and thesis may be sent to the Registrar for further necessary action,

**(Dealing clerk)**

Send 02 copies of the thesis to the Registrar

**Dean PGS**