

List of Suggested Examiners for M.Tech. / M.Des Thesis/DIIT Project Oral Board

Name of Student: _____ Roll No. _____

Department / IDP: _____

Month & Year of first Registration in the Programme: _____ / _____
(month) (year)

Thesis Title: _____

(in capitals) _____

Thesis Supervisor(s): _____

| Name of Examiners | Department/IDP |
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| 6. _____ | _____ |
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Forwarded

Thesis Supervisor(s)
Date:

Convener, DPGC
Date:
Approved

Head of Department
Date:

Chairperson, SPGC
Date: