



## MS/MPhil Proposal Defense Approval from ASRB

Date: \_\_\_\_\_

Student Name: \_\_\_\_\_ Registration No: \_\_\_\_\_

Field of Study: \_\_\_\_\_ Area of Research: \_\_\_\_\_

Research Title \_\_\_\_\_

Supervisor/s Name: \_\_\_\_\_ Signature: \_\_\_\_\_

### **Committee:**

MS Coordinator/HoD: Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Dean: Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Subject Expert (if any): Name: \_\_\_\_\_ Designation: \_\_\_\_\_ Signature: \_\_\_\_\_

Graduate Office Rep: Name: \_\_\_\_\_ Designation: \_\_\_\_\_ Signature: \_\_\_\_\_

*Note: Though it will be an open defense the quorum is at least three members from above*

### **For Official Use**

The above mentioned student has successfully defended his/her MPhil proposal and his/her name is recommended to Board of Advanced Studies & Research for approval.

Supervisor/s:

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Approved by the \_\_\_\_\_ Board of Advanced Studies & Research in its meeting held on \_\_\_\_\_

Director PGS

HoD

Dean