

Panel Suggested for Doctoral Committee formation

Name of the Candidate:

Address of the Candidate:

PhD provisional Reg. No:

Research Title:

PhD registration		Department of research (as allotted by KUHS)						
		Research Centre (as allotted by KUHS)						
No	Category	Name	Address (Home)	Address (Official)	Phone number	Is the criteria is satisfied (as per PhD regulations)	Remarks,* if any	
A	Guide					Yes/No		
B	Co- Guide (if any)					Yes/No		
C	Teaching faculty from the Department (from within the Research Centre)							
1						Yes/No		
2						Yes/No		
D	Teaching faculty member from outside the Department (from within or outside the Research) Centre)							
1						Yes/No		
2						Yes/No		

***Please give remarks, if the criteria are not satisfied, as per PhD regulations**

Recommended:

Signature of Supervising Guide:

Name:

Designation:

Seal

Forwarded:

Signature of Head of the Department:

Name:

Designation:

Contact No.

Mail ID.

Seal

Countersigned:

Signature of

Head of the institution/Principal/Dean:

Name:

College:

Seal

- 1. Please attach Bio-data of the persons suggested (attested by the guide) for verification (on the eligibility for including in the doctoral committee) and for documentation.*
- 2. Please forward this form and the Bio-data, signed, scanned copy, by mail, if not able to submit as hard copy*