भारतीय विज्ञान शिक्षा एवं अनुसंधान संस्थान कोलकाता, मोहनपुर-741246,
INDIAN INSTITUTE OF SCIENCE EDUCATION AND RESEARCH KOLKATA, Mohanpur – 741246

Thesis evaluation and Intimation for Final Viva Voce

Name of the student:	
Registration No. & Date:	
Title of the Thesis:	
Supervisor:	
Co-Supervisor *(if applicable):*	
PGAC Convener	
Head of the Department:	

Evaluation of thesis:

Kindly use separate sheet, if necessary

Recommendation *(kindly tick the appropriate box)*:

☐ **Final viva voce is recommended**

☐ **Final viva voce is not recommended**

Schedule of Final viva voce:	**Date**	**Time**	**Venue**
Name of the Indian Reviewer:			

It has been ensured that all the corrections including modifications/revisions suggested by the external reviewers have been duly incorporated by the student.

Supervisor | **Co-supervisor** | **PGAC Convener**

Head of the Department

Date: _____