Form No: PH.D.:19

 

**INDIAN INSTITUTE OF PETROLEUM AND ENERGY**

**Visakhapatnam**

**PARTICULARS OF SCHOLAR**

**(To be submitted along with a final thesis)**

|  |  |
| --- | --- |
| Full Name of the Scholar in English  (IN BLOCK LETTERS)***(For Degree Certificate)*** |  |
| Full Name of the Scholar in Hindi  ***(For Degree Certificate)*** |  |
| Roll Number  ***(For Degree Certificate)*** |  |
| Status of Scholar (Full Time/Part Time/External) |  |
| Branch & Department |  |
| Title of Thesis (IN ENGLISH)  ***(For Degree Certificate)*** |  |
| Title of Thesis (Pronunciation in Hindi)  (Example – टाइटल ऑफ़ थीसिस)  ***(For Degree Certificate)*** |  |
| Name of the Supervisor |  |
| Name of the Co-Supervisor (if any) |  |
| Name and affiliation of the External Co- Supervisor (if any) |  |
| Date of Synopsis Seminar |  |
| Father’s Name in English (IN BLOCK LETTERS) |  |
| Mother’s Name in English (IN BLOCK LETTERS) |  |
| Complete Postal Address with PIN code |  |
| E-mail ID |  |
| Mobile No. |  |

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Signature of the Scholar