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