GNA UNIVERSITY

Inspiring Innovation.....

◆ SYNOPSIS SUBMISSION FORM ◆

(to be submitted along with Synopsis)

Date of Submission: DD / MM / YYYY **Semester: Jan/July to June/Dec, 20**YY

STUDENT DETAIL

Name:

Registration Number: G U - 2 0 - **Faculty:**

Permanent Address:

Mobile: +91

Email ID:

SUPERVISOR DETAIL

Name:

Address:

Mobile: +91

Email ID:

CO-SUPERVISOR DETAIL (if any)

Name:

Address:

Mobile: +91

Email ID:

UNNDERTKING BY THE STUDENT

I have successfully completed coursework examination and would like to submit synopsis on the topic given below with the consent of my Supervisor and Co-Supervisor : _____

Date: DD / MM / YYYY

Student's Signature

CERTIFICATES TO BE COMPLETED BY THE SUPERVISOR AND CO-SUPERVISOR

Certified that the student with above details has carried out research wok detailed in Ph.D synopsis being submitted during the period.....to .....under my supervision.

Supervisor's Signature

Co-Supervisor's Signature

Note: Students can attach information regarding Publishing, Conference Presentations, FDPs Attended.