INDIAN INSTITUTE OF TECHNOLOGY INDORE

(Form-PTS 2)

CERTIFICATES TO BE SUBMITTED ALONG WITH THE PhD SYNOPSIS

	Date:
CERTIFICAT	FE NO.1. (To be completed by Academic Section)
Certified that Mr. / Ms.	, Roll No,
Discipline of	, has been prescribed
Course Credits and t	hat he/ she has completed the prescribed credit requirements.
	Deputy / Assistant Registrar (Academic)
	IO. 2 (To be completed by the Head of the Discipline)
Certified that the candidate	e with details as above, in Certificate No.1. has presented the work of his
/ her PhD thesis to his/her PSPC of	during the OPEN Seminar Examination conducted on
A copy of the report of the OPEN	Seminar Examination is attached herewith for reference.
The publication requirement	nts for submission of the Ph.D. thesis have been fulfilled as per Senate
guidelines.	
	Signature:
	Name:
	(Name & Signature of Head of the Discipline with date)
	e completed jointly by the PhD Student and Thesis Supervisor(s))
	e with details as above, in Certificate No.1 has carried out the research is and Thesis being submitted, during the period
	to
(Date of registrstion)	(Date of submission)
Further certified that:	
1) There is a prima facies case for	
, .	ne thesis does not include any work which has, at any time, previously,
	f a degree except to the extent of point 3 below.
	of the Thesis relate to collaborative work : (mention briefly, or state
there are none)	
Name and Signature of Candida	te (with date) :
Name and Signature of Ph.D. Su	upervisor (with date): 1
Name and Signature of Ph.D. Su	upervisor (with date): 2
Name and Signature of Ph.D. Su	pervisor (with date): 3

CERIFICATE NO.4 (To be completed by the PhD Student)

I submit herewith FIVE copies of the synopsis of my Ph.D. Thesis, together with certificates from the Academic Office, Head of the Discipline, the PhD Thesis Supervisor(s), as laid down under the Ph.D. rules. I have also mailed the Portable Document Format (PDF) file of the Synopsis to <u>dracademic@iiti.ac.in</u>.

My address for communication will be as follows, I also hereby undertake to initimate the Academic Section of any change of address:

Signature of the candidate (with date):	
Full Name of the PhD Student:	-
Roll No.:	
Disciplinet and School:	-

Certificate No.5. (to be completed by the Dean, Academic Affairs)

The synopsis and thesis, with details as above, may be accepted by the Academic Section for evaluation by the external examiners.

Conditions and further remarks, if any: