**Thesis Processing Cell**

**Plagiarism Prevention Desk Processing Form**

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| --- | --- | --- |
| **Name of the Student:** | **Roll No:** | **Email:** |
| **Department:** | **Programme:** | **Phone:** |
| **Thesis Supervisor:** | **Email:** | |
| **Title of the Thesis:** | | |

**Date of Submission to PPD:**

**----------------------------------------------------------------------------------------------------------------(To be filled at the Plagiarism Prevention Desk)**

**Similarity Index of the thesis is .**

**Signature**

**Coordinator, Thesis Processing Cell**

**Date**

**----------------------------------------------------------------------------------------------------------------Declaration by the Student**

I have checked the Similarity Report and am satisfied with the content of the thesis (Enclosure, if needed).

**Signature of the Student**

**Endorsement by the Supervisor**

**Date**

I have checked the Similarity Report and the similarity is at acceptable levels.

**In case the Similarity Index could not be brought down to the required 10% after removing the various sources and remains above 10%, the reasons may please be specified below (Enclosure, if required).**

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**Signature of the Supervisor**

**Date**

---------------------------------------------------------------------------------------------------------------------------The thesis may be submitted in its present form.

**Signature**

**Dean/Associate Dean, Academic Affairs**

**Date**

Updated on February17, 2020