

**E-I- Form**

**S.No.**

**PERIYAR UNIVERSITY**

**STRICTLY CONFIDENTIAL Ph.D. SECTION**

# PERIYAR PALKALAI NAGAR, SALEM – 636 011

# PROFORMA FOR FURNISHING THE NAMES OF EXPERTS TO EVALUATE PH.D. THESIS

**(Note: Only this form should be used and returned with full particulars typewritten)**

NAME OF CANDIDATE :

TITLE OF THESIS :

NAME OF SUPERVISOR :

DEPARTMENT :

INSTITUTION :

# PANEL OF EXPERTS

**(Please suggest at least four names under each category along with brief Bio-Data)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **I. OUTSIDE INDIA** | | | | | |
| Name and Designation  **(1)** | Place of work and country  **(2)** | Field of specialization  **(3)** | Experience in years  **(4)** | Acceptance ascertained by supervisor (Y/N)  **(5)** | Remarks  (FOR OFFICE USE ONLY)  **(6)** |
| 1.  2.  3.  4. |  |  |  |  |  |

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| --- | --- | --- | --- | --- | --- |
| **II. SOUTH INDIA (OUTSIDE PERIYAR UNIVERSITY REGION - WITHIN 500 kms)** | | | | | |
| Name, Designation and address  **(1)** | Name of the State  **(2)** | Field of specialization  **(3)** | Experience in years  **(4)** | Acceptance ascertained by supervisor (Y/N) **(5)** | Remarks (FOR OFFICE USE ONLY)  **(6)** |
| 1.  2.  3.  4. |  |  |  |  |  |

Certified that none of the experts suggested including the supervisor and Co-Guide wherever applicable is related to the candidate and further certified that the panel of experts has been suggested in consultation with the Doctoral Committee.

# Signature of Co-Guide Signature of Supervisor

**(Wherever Applicable) With Designation**

# Date:

**FOR OFFICE USE ONLY**

Submitted for orders regarding the two persons to be appointed (One from India and other from Outside of India to adjudicate on the above thesis, besides the supervisor).