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**Appointment of Panel of Examiners for the Thesis Examination of Postgraduate Candidates**

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| **Student’s Name (With Initials):** | Mr./Ms. |
| **Registration No.:** |  |
| **Degree Programme:** |  |
| **Department:** |  |
| **Year/ Intake:** |  | **Date of Commencement:** |  |
| **Research Topic:** |  |
| **Research Supervisor(s):***Senior Lecturer or above or a person with appropriate Postgraduate qualification.**(Please indicate Academic/ Professional Qualifications and designation for external supervisors)* | ***(At least one internal member)***(1) |
| (2) |
| **Approval for Maximum Duration Obtained** (*Applicable for students already completed 3 years*) | **Yes** |  | **No** |  | **N/A** |  | **If Yes, Maximum Duration Ends on:** |  |
| **Examinable copies submitted?** | **Yes** |  | **No** |  |  | **If Yes, Date of Submission:** |  |

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| **Examiner’s Name with Initials** | **Academic & Professional Qualifications \*** | **Designation****Department / Faculty \*\*****Official Address \*** |
| *(****External Examiner****: Senior lecturer or above or a person with appropriate postgraduate qualifications, external to the department, preferably outside the university.)* |  |  |
| *(****Internal Examiner****: Senior lecturer or above.)* |  |  |
| *(****Supervisor****.)* |  |  |

*\* Only for External Examiners/ Moderators*

 *\*\* Only for Internal Examiners / Moderators*

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| **Prepared by:** |
| *Research Supervisor:* |  | *Date:* |  |
| **Checked by:** |
| *Course Coordinator:* |  | *Date:* |  |
| **Recommended by:** |
| *Head of the Dept.:* |  | *Date:* |  |
| *Director/ PGS:* |  | *Date:* |  |
| *Dean/ Engineering:* |  | *Date:* |  |