



SRINIVAS UNIVERSITY

Srinivas Nagar, Mukka– 574 146, Surathkal, Mangalore, Phone :0824-2477456

(Private University Established by Karnataka Govt. ACT No.42 of 2013.

Web :www.srinivasuniversity.ac.in, Email: info@srinivasuniversity.ac.in

DOCTORAL COMMITTEE MEETING REPORT

Name of the Candidate	
Date of meeting	
Date of Provisional Registration as per office order	
Registration Number	
Branch/Discipline/Program	
Full – time / Part – time Registration	
Title of the Proposed Research work	
Research Centre	
Name of the supervisor	
Name of the Co- supervisor's	
Domain Expert-1 (External)	
Domain Expert-2 (External/Internal)	
Head of Research Centre/Department	
Head of Institute/Nominee (Chairperson)	
Comments on the Ph.D. Work: (Attach additional sheet if necessary)	
Suggestions for Further Work:	
Recommendations:	

--	--

Signature of the supervisor	
Signature of the co-supervisor	
Signature of Domain Expert (External)	
Signature of Domain Expert (Internal)	
Signature of Research Centre Coordinator	
Signature Head of institute	