**FORM-XII**



****

**NATIONAL INSTITUTE OF TECHNOLOGY MEGHALAYA**

**बिजनी कॉम्‍पलेक्‍स, लैटमुख्‍्राह, शिलांग Bijni Complex, Laitumkhrah, Shillong-793003**

#####

**REPORT OF EXAMINERS OF ORAL DEFENCE EVALUATION COMMITTEE**

Name of the Scholar:

Roll no:

Department:

Title of the thesis :

Date of ODE:

The examiners of Oral Defence Evaluation Committee (ODEC) certify that the thesis mentioned above submitted by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to the NIT Meghalaya in partial fulfillment of requirement of the Ph.D degree in the discipline of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has been examined by us and we recommend that **(please tick the one relevant)** ;

|  |  |
| --- | --- |
| 1. **The degree be awarded**

**OR** | [ ]  |
| 1. **We recommend that the candidate be examined further on another date not later than\_\_\_\_\_\_\_\_**

**OR** | [ ]  |
| 1. **The candidate has not performed to our satisfaction and does not deserve the degree of Ph.D**
 | [ ]  |

|  |
| --- |
| **Name & Signature of the ODEC members:** |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Chairman (Name) -**  | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Indian Examiner (Name) -** |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****External DC Member (if any) (Name) -** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Member (Name) –** |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Member (Name) –** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Member (Name) –** |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Member (Co-Supervisor) (Name)-**  | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Convenor & Supervisor (Name) -** |

Signature of DRC Chairman

Date:

Forwarded to Dean(AA)

Remarks by Dean (AA)

Dean (AA)

**Approval for Provisional certificate**

Director