



राष्ट्रीय प्रौद्योगिकी संस्थान अगर्तला

NATIONAL INSTITUTE OF TECHNOLOGY AGARTALA

Comprehensive Examination Committee

Form NITA/ACAD/Ph.D./7

DEPARTMENT OF

Name of the Student	Enrollment No.	Date of Enrollment

Sl. No.	Thesis Supervisor(s)	Date of Examination
1		
2		

EXAMINATION COMMITTEE

Sl. No.	Name	Department	Signature
1			
2			
3			
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Chairman, DPPC

Dean, (Academic)

Note: After signature of the Dean (Academic), the original copy to be kept in the personal file of the student and a photocopies to be sent to the Supervisor, department.