



SRM UNIVERSITY

(Established under section 3 of UGC Act 1956)

OFFICE OF THE CONTROLLER OF EXAMINATIONS

PANEL OF EXAMINERS

01.	Name of the Scholar	
02.	Title of the Thesis	
03.	Faculty	
04.	Name of the Supervisor	
05.	Indian Examiners (3 Numbers) and Foreign Examiners (3 Numbers). Profile of the examiners should be submitted individually in the given format. (Refer Page No.2)	

SUPERVISOR

(Signature with Name and Seal)

JOINT SUPERVISOR

(Signature with Name and Seal)

(IF applicable)

PROFILE OF THE (INDIAN/FOREIGN) EXAMINER – (I / II / III)

1. Name of the Examiner :
2. Designation :
3. Department :
4. Name of the University/College :
where he/she is currently
working
5. If the examiner is working in
a college, to mention whether
the department is an approved : Yes / No
research department or not
6. Broad area of research :
7. Total number of publications :
8. Total number of Ph.D scholars :
currently guiding
9. Total number of Ph.D scholars :
completed
10. Mention two or three
recent publications
(With Journal name, Title of
the articles, Issue/Volume
number, month & year of the
publication) :
11. Complete Postal Address :
Line 1: _____
Line 2: _____
Line 3: _____
District or City : _____
Zip or Pin code : _____
Province or State : _____
Name of the Country : _____
Phone: Landline : _____ Mobile : _____
(Including the Country Code)
Email-id (i) : _____
(ii) : _____