



INDIAN INSTITUTE OF TECHNOLOGY INDORE

(Form-PTS 2)

CERTIFICATES TO BE SUBMITTED ALONG WITH THE PhD SYNOPSIS

Date: _____

CERTIFICATE NO.1. (To be completed by **Academic Section**)

Certified that Mr. / Ms. _____, Roll No. _____,
Discipline of _____, has been prescribed
_____ Course Credits and that he/ she has completed the prescribed credit requirements.

Deputy / Assistant Registrar (Academic)

CERTIFICATE NO. 2 (To be completed by the **Head of the Discipline**)

Certified that the candidate with details as above, in Certificate No.1. has presented the work of his / her PhD thesis to his/her PSPC during the OPEN Seminar Examination conducted on _____.
A copy of the report of the OPEN Seminar Examination is attached herewith for reference.

The publication requirements for submission of the Ph.D. thesis have been fulfilled as per Senate guidelines.

Signature: _____

Name: _____

(Name & Signature of Head of the Discipline with date)

CERTIFICATE NO.3. (To be completed jointly by the **PhD Student and Thesis Supervisor(s)**)

Certified that the candidate with details as above, in Certificate No.1 has carried out the research work detailed in the Ph.D. Synopsis and Thesis being submitted, during the period

_____ to _____
(Date of registration) (Date of submission)

Further certified that:

- 1) There is a prima facies case for consideration of the thesis.
- 2) To the best of pur knowledge the thesis does not include any work which has, at any time, previously, Been submitted for the award of a degree except to the extent of point 3 below.
- 3) The following sections(s) (if any) of the Thesis relate to collaborative work : (mention briefly, or state there are none)

Name and Signature of Candidate (with date) : _____

Name and Signature of Ph.D. Supervisor (with date): 1. _____

Name and Signature of Ph.D. Supervisor (with date): 2. _____

Name and Signature of Ph.D. Supervisor (with date): 3. _____

CERIFICATE NO.4 (To be completed **by the PhD Student**)

I submit herewith FIVE copies of the synopsis of my Ph.D. Thesis, together with certificates from the Academic Office, Head of the Discipline, the PhD Thesis Supervisor(s), as laid down under the Ph.D. rules. I have also mailed the Portable Document Format (PDF) file of the Synopsis to dracademic@iti.ac.in.

My address for communication will be as follows, I also hereby undertake to intimate the Academic Section of any change of address:

Signature of the candidate (with date): _____

Full Name of the PhD Student: _____

Roll No.: _____

Disciplinet and School: _____

Certificate No.5. (to be completed by the **Dean, Academic Affairs**)

The synopsis and thesis, with details as above, may be accepted by the Academic Section for evaluation by the external examiners.

Conditions and further remarks, if any:

(Signature of DOAA with date)