Report of MTech/MDes/MS(By Research)/ DIIT Project Oral Examination

Name of Student:		Roll No.:	
Department/IDP:			
Month & Year of first Registration in the Pr			
		Date of Oral Examination*:	
Project Title:			
(in Capitals)			
Project Supervisor(s):			
Report of the Board: Project: Acceptable/No			
Oral Examination Committee			
Name of Examiners	Department	C: au atrum	
Name of Examiners	Department	Signature	
1			
2	·	_	
3			
4			
Project Supervisor(s)		Convener, DPGC	
Date:		Date:	
<u>(</u>	Office Use Only		
Course Credits =	Project Credits =	CPI =	
The student has completed the programme			
		Chrimmen SPCC	
		Chairperson, SPGC	

Date: