(Center, size 20, Book Man Style)

TITLE OF THE THESIS



A Thesis Submitted

In Fulfillment of the Requirements

(Center, size 14, Times New Roman

For the Degree of

DOCTOR OF PHILOSOPHY IN

NAME OF DEPARTMENT/SUBJECT

FACULTY OF [NAME OF CONSTITUENT UNIT.....]

By

Name of Candidate

(Enrolment No:)

Under the Supervision of

(Name) (Designation)____

And

Co – Supervision of (if any)

(Center, Bold, Size 14, Times New Roman

Department / Faculty/ Name of Organisation.....

(Name)

Year of Submission.....

Year of submission (Center, Bold, 20 size, Times New Roman

(Center, Bold, 22 size, Times New Roman, Size 9 for remaining text

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SH 31, Bypass square, Rewas Dewda Road, Mandsaur, Madhya Pradesh-458001. Website: www.mandsauruniversity.edu.in, Email: phd@meu.edu.in Ph. No. 09752122999, 09425924111. Fax: 07422-239111

14, Times New Roman, Upper case

(Center, Bold, size

If Faculty and department differs, then both are mentioned otherwise Faculty of is sufficient

Side Heading of Thesis

Ph.D Thesis

Title of Thesis

Name of Candidate

Month Year Bold, Times New Roman, Size as per Length of thesis



CERTIFICATE

Bold, Size 18, Times New Roman.

Size 12, Times New Roman,

Signature (Name of Supervisor) (Designation) (Address)

Date:

Note- if there is Co-supervisor, then sign separate certificate on his/her letter pad.

Ph.D. OFFICE	
The Ph.D. Final Viva-Voce Examination of Mr./Ms	_ Research
Scholar, has been held on	

Seal & Sign of Ph.D. Research Cell

(Declaration to be given by the Candidate on a non judicial Stamp paper of Rs 100/- and verified by a Notary)

DECLARATION

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R/a	D		Address					
sol	emnly affi	irm ur	nder oath tha	t this Ph.D. The	esis entitled "		"was carried	d out by
me	for the de	gree o	of Doctor of	Philosophy in F	aculty of (Dept).	unc	ler the guida	ince and
sup	pervision of	of Dr.		, Faculty o	f, D	epartme	nt of	,
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Progress reports.								
14. Research scholar has submitted summary report	- ·	YES/NO						
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16. Research scholar has submitted proof of resear in national / international seminar / conference	1 1 1	YES/NO						
17. Research papers are verified by guide as per MU & UGC Norms 18. Research scholar has submitted undersigned application for Prethesis Presentation and Submission forwarded through supervisor								
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9. All sources used have been cited appropriate	YES/NO	
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11. Research scholar has made corrections, su Prethesis presentation in his final thesis ar	• • •	YES/NO
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TITLE OF THE THESIS



A Thesis Submitted In Fulfillment of the Requirements for the Degree of

DOCTOR OF PHILOSOPHY (NAME OF FACULTY/DEPARTMENT)

By
Name of Candidate
(Enroll. No:)
Under the Supervision of

Name)	
(Designation)	
_	f
Vear of Submission	

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TITLE OF THE THESIS



A SUMMARY

Submitted to Mandsaur University for Award of Doctoral Programme

																									(Year)
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Submitted by **Scholar Name** (Enrolment Number)

Co Supervisor (if any) **Guide Name**Professor, Head

Faculty/Dept. Of

Name of College/ University

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Approved by UGC, Rewas Dewda Road, SH – 31, Mandsaur, Madhya Pradesh- 458001 **Ph. No. +919752122999, +919425924111**

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NOTE: At The End of Summary Scholar and Guide Both Have To Sign





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As per UGC Notification, July 2016

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				Facul	lty	of
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DEGREE OF DOCTOR OF PHILOSOPHY (Ph.D.)

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(For pre submission Viva-voce)

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FACULTY:

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Date of submission of the synopsis		
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Mobile Number & E-mail id		
Name of the Research Centre where experimental		
work is performed		
(Attach certificate or permission letter of centre of centre)		
Name Designation and full address of the Co-		·
Supervisor		

Signature of the Candidate with date.

NOC from Supervisor – Allowed/Not Allowed for submission.

Signature of the Co- Supervisor with date	Signature of the Supervisor with date	Signature of the Head of the Department with	Signature of the Dean / Director of faculty
and seal (if applicable)	and seal	date and seal	with date and seal



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VERIFICATION OF PRE-THESIS CORRECTION

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