

ETERNAL UNIVERSITY, BARU SAHIB



Report of Viva-Voce Examination for(_____)Thesis

Name of student	
Registration Number	
Department	
College	
Date of Pre-Thesis Seminar	
Name of Major Advisor	
Title of Thesis	

(Recommendation by Viva-Voce Examination Committee) (Mark ✓)

Date of Thesis Defense/Viva-Voce	
Decision of the Committee	The Research Thesis is
	<input type="checkbox"/> Satisfactory
	<input type="checkbox"/> Unsatisfactory
	(If not satisfactory, specific reasons must be furnished separately)

Name and signature of thesis viva-voce Examination committee members with date

Dean	
Major Advisor	
Controller of Examination	

Approved

Dean Postgraduate studies or Representative