



GANPAT UNIVERSITY

Ganpat Vidhyanagar-384012, Ta & Dist. Mehsana, Gujarat

www.ganpatuniversity.ac.in

Ph.No.02762-286080, 286924

PH.D THESIS SUBMISSION FORM

1) Name of the Student : _____

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3) Registration No : _____

4) Date of Registration : _____

5) Department /College : _____

6) Name of Guide : _____

7) Name of Co-Guide : _____

8) Title of the Thesis : _____

Signature of Scholar: _____

Date: _____

Recommendation:

Certificate of having completed a course of study for Ph.D.

I / We hereby certify that the student is a registered student of Ganpat University. He / She has already completed the prescribed course work and presented His / Her Pre-Synopsis Seminar in accordance with the regulation under supervision of the undersigned.

Name of Guide : _____ Signature: _____

Name of Co-Guide: _____ Signature: _____

Date:- _____

Recommendation by Dean:-

Name of Dean : _____ Signature: _____

Encl:-

- 1.Six Binded Copies of the Thesis in prescribed format of University with a Soft Copy in CD.
- 2.No Due Certificate From concerned Principal/Head & Dean.
- 3.Receipt No.:- _____ Date:- _____ for Thesis Submission Fee.