## Report of M.Tech. Thesis Oral Examination for B.Tech.-M.Tech. Dual Degree Students

Name of Student:		Roll No.:
Department:		
Month & Year of first Registration i	n the Programme:	
_	(month)	
Date of Thesis Submission:	Date of Oral	Examination*:
Thesis Title:		
(in Capitals)		
Thesis Supervisor(s):		
Report of the Board: Thesis/Project:		
Oral Examination Committee		
Name of Examiners	Department	Signature
1		
2		
3		
4	<del></del>	
5		
Thesis Supervisor(s)		Convener, DUGC
Date:		Date:
* Oral examination be scheduled with	thin four months and only after se	even days of submission of Thesis.
·	Office Use Only	
Course Units =	Thesis Units =	CPI = UG- PG -
The student b	as completed the programme	

Chairperson, SUGC Date: