**PGS – 20***(in triplicate)*

**Sardar Vallabhbhai Patel University of Agriculture &Technology Meerut – 250 110**

No………………….

Dated………………

**Department of ……………………………………………………..**

**College of ……………………………………………………..**

**Registrar**

**Through:** Proper channel

**Sub:** Permission for thesis viva- voce examination ( Online for Master thesis only)

Thesis Evaluation Report of Mr. ………………………… Id. No. ………….. a students for Master’s/Doctoral Degree with major in ………………………….. and minor in …………………… has been received to be satisfactory. As per telephonic conversation and consent of the External Examiner, the thesis Viva-voce Examination is proposed to be conducted on……………………..

Permission may be please accorded.

**Dated:** ……………. **Chairman Advisory Committee**

 **(Sign., Name& Designation)**

Recommended/Not recommended & forwarded,

**Dated:** ……………. **Head of the Department**

Recommended/Not recommended & forwarded,

**Dated:** ……………. **Dean of the College**

**Registrar**

 Recommended and forwarded,

**Dated: ………….**

**Dean PGS**

**Office of the Registrar**

**No.**

**Date:**

Permitted and copies be sent to-

1. Dean PGS
2. Advisor
3. Students file

**Registrar**