



Declared as State Private University under section 2f of the UGC act, 1956

### Co-Supervisor Consent Form

Name of the PhD Scholar : \_\_\_\_\_

Session / Semester : \_\_\_\_\_

Enrollment Number : \_\_\_\_\_

Faculty : \_\_\_\_\_

Department : \_\_\_\_\_

Area of Research : \_\_\_\_\_

Name of Co-Supervisor : \_\_\_\_\_

Remarks by Co-Supervisor : \_\_\_\_\_

Date:

Name and Signature of the PhD Scholar

Name and Signature of the Co-Supervisor

Name and Signature of the Supervisor

Chairperson DRC

**Note: Attach Copy of Co-Supervisor's CV along with this form.**