St.XAVIER'S CATHOLIC COLLEGE OF ENGINEERING, NAGERCOIL-3 CFRD

PROFORMA TO CONDUCT Ph.D. VIVA-VOCE EXAMINATION

Name of the Scholar	
Register Number	
Address	
Title of the thesis	
University	
Supervisor Details	
Details of Examiners for oral board	
Date and Time	
Venue	

No due certificate

Sl. No.	Details	No dues certificate	Signature
1	Library		
1.	(Submit a copy of thesis)		
2.	Office		
	(Research Fee Completion)		
3.	Supervisor		
4.	HOD of the Supervisor		

Research Scholar Dean- Research Principal

Note: Copy of Ph.D Viva notification to be enclosed