Department of Computer Science and Automation

FORM FOR REQUEST FOR CONSTITUTION OF BOARD FOR COMPREHENSIVE EXAMINATION / GENERAL TEST

1.	Name of the Candidate & SR. No. :									
2.	Degree Registered for									
3.	Date of Registration :									
4.	Field of Investigation									
5.	Likely Topic of Research :									
6.	Name of the Research Supervisor/s :									
7.	Board of Examiners Suggested for Comprehensive Examination/General Test									
Ph. D (Comprehensive Examination)					M.Sc (Engg.) (General Test)					
Name	ne Department			Name			Department			
1. 2. 3. 4. 5. 6.				1. 2. 3. 4.						
8.	Research Training Programme :									
	Summary :									
Credits Taken	At 200 Level	At 300 Level	tal		RTP Date Completed	Number of Credits		CGPA Secured		
Detail	ls :									
Course Code	Course Title					Credits	Grade	T	erm When Taken	
9.	We have attached syllabus for the Comprehensive Examination/General Test									
10.	Summary of the proposed research work :									
Signature of the Research Supervisor/s Signature of the Chairman								airman		

Date :

Date :