

STRICTLY CONFIDENTIAL

(Applicable for the Students registered from September' 2005 and onwards)

**APPOINTMENT OF TWO EXTERNAL EXAMINERS TO EVALUATE THE THESIS FOR THE
DEGREE OF PH.D./VIDYAVARIDHI OF BANARAS HINDU UNIVERSITY**

Name of the Candidate	:
Term of Registration	:
Department/Faculty/School of	:
Topic of Research	:

Name of examiners recommended by the Departmental Research Committee at its meeting held on _____

(A) Indian Examiners but outside Varanasi (at least FOUR)			
1. Name: _____ Address: _____ PIN: _____ City: _____ e-mail _____ Tel.: _____ FAX _____	3. Name: _____ Address: _____ PIN: _____ City: _____ e-mail _____ Tel.: _____ FAX _____		
2. Name: _____ Address: _____ PIN: _____ City: _____ e-mail _____ Tel.: _____ FAX _____	4. Name: _____ Address: _____ PIN: _____ City: _____ e-mail _____ Tel.: _____ FAX _____		

Note:

1. DRC should send FOUR names of Indian examiners covering all the regions of the country EXCEPT VARANASI and also FOUR names of experts from foreign universities.
2. Complete postal address including the name of the City/Country in which the Department/university is located Pin/Zip Code, e-mail and Fax/Phone number must also be sent for obtaining quick consent from the experts. In case of e-mail ID please ensure that the same is written LEGIBLY or types correctly.
3. In the case of retired person position held by the examiners at the time of retirement should be clearly mentioned while giving his residential address.

For the use of the Dean of the concerned Faculty:

S.No. _____ approved from panel of Examiner's from India.

D.R. (Academic)

Signature of the Dean (along with seal)

(B) Foreign Examiners (at least FOUR)

1. Name: Address:	3. Name: Address:
COUNTY PIN:	COUNTRY PIN:
ZIP: e-mail	ZIP: e-mail
Tel.:	Tel.:
FAX	FAX
2. Name: Address:	4. Name: Address:
COUNTY PIN:	COUNTRY PIN:
ZIP: e-mail	ZIP: e-mail
Tel.:	Tel.:
FAX	FAX
Whether the recommendation is in accordance with instructions in the note overleaf.	YES/NO
Special Remarks if any:-	

Signatures of the DRC Members

1.	4.
2.	5.
3.	6.

Chairman, DRC

Certified that:-

1. All the addresses are complete including PIN/ZIP code;
2. All the addresses are official or where the address is not official, the position held by the addresses is clearly stated;
3. The proforma is complete in all respect.

For the use of the Dean of the concerned Faculty:

Chairman, DRC, (Seal)

S.No. _____ approved from panel of Examiner's from India.

D.R. (Academic)

Signature of the Dean (along with seal)