

ASSAM AGRICULTURAL UNIVERSITY, JORHAT
Faculty of _____

Certificate of Thesis *viva-voce* of Ph. D. Degree Student

This is to certify that thesis/dissertation/project entitled,
.....
..... submitted by Mr./ Ms./ Dr.
.....
Roll No. to the Assam Agricultural University, in partial
fulfillment of the requirements for the degree of Doctor of Philosophy in the subject of
..... has been examined by us in a viva-voce held on
..... and found satisfactory/ unsatisfactory.

**(Major Adviser & Chairman
Board of Examiners)**

(External Examiner)

Members of the Advisory Committee:

Name and Designation

Signature

1.	Dr. _____	Major Adviser & Chairman	_____
2.	Dr. _____	Co-Major Adviser	_____
3.	Dr. _____	Member (Major Discipline)	_____
4.	Dr. _____	Member (Major Discipline)	_____
5.	Dr. _____	Member (Minor Discipline)	_____
6.	Dr. _____	Member (Supporting Discipline)	_____
7.	Dr. _____	Member (Supporting Discipline)	_____
8.	Dr. _____	Member (HoD)	_____
9.	Dr. _____	Member (Other discipline/Faculty)	_____

Memo. No. _____ Dtd. _____

Forwarded to the Director of Post Graduate Studies

Signature of the HoD, _____

Memo. No. _____ Dtd. _____

Forwarded to the Registrar/Dy Registrar (Acad), AAU for favour of necessary action

Signature of the Director of Post Graduate Studies
Assam Agricultural University