**FORM-11**



**क्षेत्रीय जैवप्रौद्योगिकी केन्द्र**

**REGIONAL CENTRE FOR BIOTECHNOLOGY**

(An Institution of National Importance created by an Act of Parliament

by Department of Biotechnology, Govt. of India, under the auspices of UNESCO)

**PANEL OF EXAMINERS FOR PhD THESIS EVALUATION**

(To be submitted to RCB along with Form-9 and Form-10 in a sealed envelope)

**Name of the Institution :**

**Academic Programme :**

**Name of the Student :**

**Registration Number :**

**Title of Thesis :**

**Name of Guide :**

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| --- | --- |
| **S. No** | **Examiner Particulars**  **(Associate Professor and above)** |
| 1 | Name :  Area of Specialization :  Designation :  Department :  University/Institution :  Address :  Phone/Mobile :  Email ID : |
| 2. | Name :  Area of Specialization :  Designation :  Department :  University/Institution :  Address :  Phone/Mobile :  Email ID : |
| 3 | Name :  Area of Specialization :  Designation :  Department :  University/Institution :  Address :  Phone/Mobile :  Email ID : |
| 4 | Name :  Area of Specialization :  Designation :  Department :  University/Institution :  Address :  Phone/Mobile :  Email ID : |
| 5 | Name :  Area of Specialization :  Designation :  Department :  University/Institution :  Address :  Phone/Mobile :  Email ID : |
| 6 | Name :  Area of Specialization :  Designation :  Department :  University/Institution :  Address :  Phone/Mobile :  Email ID : |

**Signature of Guide**

**Signature of Academic Coordinator**

**Signature and seal of the Head of Institution**