

INDIAN INSTITUTE OF PUBLIC HEALTH GANDHINAGAR
(A University established under IIPHG Act, 2015 of Gujarat)

ANNEXURE 16: FORMAT FOR VIVA VOCE EXAMINATION REPORT

Name of the Ph.D. Scholar	
Registration No.	
Name of the Research Supervisor	
Name & affiliation of the co-supervisor (if any)	
Date of thesis Submission	
Date of Viva Voce Examination	

Title of thesis:

Recommendation (please tick one and strike out others):

<input type="checkbox"/> Satisfactory and recommended for the award of the Ph.D. Degree	<input type="checkbox"/> Not Satisfactory and recommended for 're-examination'
<input type="checkbox"/> Satisfactory with minor suggestions and recommended for the award of the Ph.D. Degree upon submission of note on revision/s made	<input type="checkbox"/> Not Satisfactory. The thesis is not acceptable for the award of PhD degree

Remarks:

Viva Voce Examination Board Members

Name, Designation, & Affiliation
(External Examiner)

Name & Designation
(Research Supervisor – Internal Examiner)

Name, Designation, & Affiliation
(Co-Supervisor, if any)

Name & Designation
(Head of the Department)

Name & Designation
Dean – Research & Training

Name & Designation
(Doctoral Studies Cell)

(Registrar)

(Director)