

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

**ANNEXURE 19: SYNOPSIS SUBMISSION CHECKLIST AND
ACKNOWLEDGEMENT**

1. Name of PhD Scholar:
2. Enrolment No.: Category: Full Time / Part Time
3. Admission Year:
4. Title of the Ph.D. Research:
5. Specialization:

Sr. No.	RAC Number	Yes/No
1	Three copies of PhD synopsis (spiral bound) as per the norm is submitted	
2	One soft copy of the thesis (pdf) is submitted	
3	PhD registration certificate is attached	
4	Coursework completion certificate is attached	
5	All RAC reports duly signed is submitted	
6	All semesters Fee receipts till the submission of thesis is attached	
7	No due certificate is attached	

Research Scholar

Research Supervisor

Co-Supervisor (if any)

For Office Use

Verified By

Acknowledgement of PhD Synopsis Submission

This is to acknowledge the PhD synopsis titled, _____
by Dr./Mr./Ms./Mrs. _____, registration
number _____ under the supervision of Dr. /Prof. _____
is submitted to Doctoral Studies Cell, IIPHG on _____ at _____
(time).

Assistant Registrar (Academics)

Date:

Place: