

**B. A. College Of Agriculture  
Anand Agricultural University- Anand**

**POST GRADUATE STUDENT COURSE WORK REGISTRATION CARD**

1. Name of student: \_\_\_\_\_
2. Registration No. : \_\_\_\_\_ 3. Registered for: M. Sc/ M.Sc.(Agri.)/Ph D
4. Academic year : \_\_\_\_\_ 5. Semester No : \_\_\_\_\_
6. Major Field : \_\_\_\_\_ 7. Minor Field: \_\_\_\_\_
8. Course allowed to be attended by the P.G. students during the odd / even semester of the academic year: 20 - 20

**I. Major Field:**

Course No.	Course Title	Credits	Course Teacher	Sign. of Teacher

**II Thesis work:**

Title of Research problem	Credit

**III Minor field:**

Course No.	Course Title	Credits	Course Teacher	Sign. of Teacher

**IV Supporting Courses:**

Course No.	Course Title	Credits	Course Teacher	Sign. of Teacher

**V Pre requisite Courses:**

Course No.	Course Title	Credits	Course Teacher	Sign. of Teacher

**VI Non Credit Compulsory Courses:**

Course No.	Course Title	Credits	Course Teacher	Sign. of Teacher

Student's Signature \_\_\_\_\_

( \_\_\_\_\_ )  
Name & Signature of Major Guide

Date: \_\_\_\_\_

**Copy F. W. Cs.:**

1. The Registrar, Anand Agricultural University, Anand through Principal office
2. P.G.T. Office.(Three Copies)
3. Each of the course teacher concerned for the above courses.

**B. A. College Of Agriculture  
Anand Agricultural University, Anand**

**JOINING REPORT**

To  
The Principal  
B. A. College of Agriculture  
Anand Agricultural University  
Anand

**S.W.Rs. through Major Guide**

Respected Sir,

I, the undersigned Shri \_\_\_\_\_  
admitted for M.Sc./ M.Sc.(Agri.)/ Ph.D. degree course in the subject  
\_\_\_\_\_ under the guidance of  
Dr./Prof. \_\_\_\_\_ at your college as per admission memo  
No. \_\_\_\_\_  
dated \_\_\_\_\_ have joined the course on \_\_\_\_\_.

I have paid all the required fees for the 1st semester of the academic \_\_\_\_\_  
year.

Yours faithfully,

Date: / /20

(Name of student)

F.W.Cs. through Major Guide:

Shri \_\_\_\_\_ has joined the course on dated  
\_\_\_\_\_.

Date: / /20

**(Major Guide)**

Note: This joining report is to be submitted within three days on joining the course to the PGT office in duplicate.

**ANAND AGRICULTURAL UNIVERSITY**  
**FACULTY OF POST GRADUATE STUDIES**

College/Centre \_\_\_\_\_

**Form for conducting PrelimiViva/ /Synopsis Presentation/Kachha bound thesis presentation / Thesis Viva of the post graduate student**

To,  
Committee Member

Sr. No.	Name	Designation	Address
1			
2			
3			
4			
5			

Dear Colleagues

Please refer the order No. \_\_\_\_\_

Dated \_\_\_\_\_ from the Principal/Registrar \_\_\_\_\_

Regarding appointment of Advisory Committee for conducting the PrelimiViva//Synopsis Presentation/Kachha bound thesis presentation / Thesis Viva examination of \_\_\_\_\_ Shri \_\_\_\_\_ registered for \_\_\_\_\_ Degree.

In this connection, I have to inform you that the PrelimiViva/ /Synopsis Presentation/Kachha bound thesis presentation / Thesis Viva preliminary examination of above student is scheduled to be held on \_\_\_\_\_ at \_\_\_\_\_ a.m./p.m. in \_\_\_\_\_.

You are therefore requested to make convenient to remain present and evaluate the students` performance.

No \_\_\_\_\_

Place \_\_\_\_\_

Date ; \_\_\_\_\_

( Signature of Major Guide)

**Corrections suggested by the External Referees in M.Sc./Ph.D Thesis**

Name of the student :

Degree : M. Sc (Agri.)/M.Sc/Ph.D

Registration No. :

Major Field of Study :

<b>Sr. No.</b>	<b>Suggestions</b>	<b>Corrections</b>
1		

<b>Sr. No.</b>	<b>Name and Designation of Committee member</b>	<b>Signature</b>
1.		(Major Guide)
2.		(Co - Guide)
3		(External Examiner)
4.		(External Examiner)

**ANAND AGRICULTURAL UNIVERSITY**  
**B. A. COLLEGE OF AGRICULTURE, ANAND**

**Performa to accord permission for Extension of Semester for PG study**

1	Name of Student	:	
2	Registration No.	:	
3	Degree	:	
4	Major Field	:	
5	Minor Field	:	
6	Progress of study :		
	• Course Work	:	
	• Seminar given	:	
	• Title of Research	:	
	• Research completed?	:	
	• Pre – qualifying examination passed?	:	
	• Prelim viva – voice examination passed?	:	
	• Thesis submitted (Kachha bound)	:	
7	Semester required to be complete the study	:	
8	Reason for delaying study with full justification	:	
9	Previous permission given by Dean, P.G. (Proof required)	:	
10	Signature of student	:	

**-PTO-**

11	Recommendation of Advisory committee	:	<b>Signature</b>
	<b>Major Guide</b>	:	
	<b>Co - Guide</b>	:	
	Member	:	
	Member	:	
	Member	:	
	Member	:	
12	Recommendation of Faculty Dean	:	



# Anand Agricultural University

## Faculty of Post-Graduate Studies

### College: B. A. College of Agriculture, Anand

#### Form for Certification of the Post-Graduate Student

1. (a) Full Name of the Student : \_\_\_\_\_  
(In capital letters) (Surname) (First) (Second)
- (b) Permanent address : \_\_\_\_\_
2. Registered for : M.Sc(Ag)/M.Sc./Ph.D. degree
3. Registration No. : \_\_\_\_\_ Date: \_\_\_\_\_
4. Fields of Study : \_\_\_\_\_  
(a) Major field : \_\_\_\_\_ (b) Minor field: \_\_\_\_\_
5. Courses attended by the student during his/her Under-graduate:

#### First Year

Semester I			Semester II						
Sr. No.	Course No. & Subject	Credits/Week			Sr. No.	Course No. & Subject	Credits/Week		
		Lect.	Pract.	Total			Lect.	Pract.	Total
1.					1.				
2.					2.				
3.					3.				
4.					4.				
5.					5.				
6.					6.				
7.					7.				
8.					8.				
9.					9.				

#### Second Year

Semester III			Semester IV						
Sr. No.	Course No. & Subject	Credits/Week			Sr. No.	Course No. & Subject	Credits/Week		
		Lect.	Pract.	Total			Lect.	Pract.	Total
1.					1.				
2.					2.				
3.					3.				
4.					4.				
5.					5.				
6.					6.				
7.					7.				
8.					8.				
9.					9.				
10.					10.				

**Third Year**

Semester V			Semester VI						
Sr. No.	Course No. & Subject	Credits/Week			Sr. No.	Course No. & Subject	Credits/Week		
		Lect.	Pract.	Total			Lect.	Pract.	Total
1.					1.				
2.					2.				
3.					3.				
4.					4.				
5.					5.				
6.					6.				
7.					7.				
8.					8.				
9.					9.				
10.					10.				

**Fourth Year**

Semester VII			Semester VIII						
Sr. No.	Course No. & Subject	Credits/Week			Sr. No.	Course No. & Subject	Credits/Week		
		Lect.	Pract.	Total			Lect.	Pract.	Total
1.					1.				
2.					2.				
3.					3.				
4.					4.				
5.					5.				
6.					6.				
7.					7.				
8.					8.				
9.					9.				
10.					10.				
11.					11.				



6. The Advisory Committee recommends the following Courses for PG Studies.

**(a) Pre-requisite courses**

Sr. No.	Course No.	Title of the Course	No. of Credits/Week		
			Lect.	Pract	Total
1.					
2.					

**Total:**

**(b) Courses under the Major Field**

Sr. No.	Course No.	Title of the Course	No. of Credits/Week		
			Lect.	Pract	Total
1.					
2.					
3.					
4.					
5.					
6.					
7.					

**Total:**

**(c) Courses under the Supporting field**

Sr. No.	Course No.	Title of the Course	No. of Credits/Week		
			Lect.	Pract	Total
1.					
2.					
3.					
4.					

**Total:**

**(d) Thesis work**

**Credit : \_\_\_\_\_**

**Total (a + b + c + d) Credits:    +    +    +    =**

**Approval of the Advisory Committee:**

Name	Designation	Signature
Major Guide		
Co Guide		
Member		
Member		
Member		

Forwarded by: **Head of the Department F. W. Cs. To:**

- (i) The Dean, Faculty of Post-graduate Studies,  
Anand Agricultural University, Anand.
- (ii) The Registrar,  
Anand Agricultural University, Anand.
- (iii) The Principal,  
B. A. College of Agriculture, Anand
- (iv) Major Guide
- (v) Student concerned

No. PGT/  
Anand, Date:

/201

**PRINCIPAL**  
College: B. A. College of Agriculture  
Anand Agricultural University  
Anand – 388 110

ANAND AGRICULTURAL UNIVERSITY  
B.A.COLLEGE OF AGRICULTURE, ANAND

**FACULTY OF POST-GRADUATE STUDIES**

**REPORT ON POST-GRADUATE PRELIMINARY EXAMINATION**

**Name of the Candidate** : \_\_\_\_\_  
**Registration No** : \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Degree** : \_\_\_\_\_  
**Semester of study** : \_\_\_\_\_ **Attempt:**      **First/Second/third**

The Advisory Committee hereby certifies that, in their judgment, the above named student has successfully passed/failed the Preliminary examination and recommends / does not recommend that this student be admitted to candidacy for the \_\_\_\_\_ degree.

Sr. no	Name	Designation	Signature
1		Major Guide	
2		Co - Guide	
3		Member	
4		Member	
5		External Examiner	

**Place:** Anand  
**Date:** . . .

**Recommendations of the Committee**

1. The candidate is given second chance.
2. The candidate is given third chance.
3. The following courses should be added to the programme of study of the candidate

No. of the course	Title of the course	Credit
1) .....	.....	.....
2) .....	.....	.....
3) .....	.....	.....

4. The candidate is discouraged from prosecuting further studies leading of Ph.D degree.
5. Other remarks:.....

**Forwarded with compliments to:**

**(Signature of Major Guide)**

- (1) Dean, Faculty of Post Graduate Studies, Anand Agricultural University, Anand – 388 110
- (2) Registrar, Anand Agricultural University, Anand – 388 110
- (3) The Major Advisor concerned.

**PRINCIPAL**

**No.:**  
**Date:**

Anand Agricultural University  
Anand – 388 110

**B A College of Agriculture  
AAU, ANAND**

Progress report of P.G. Student for the higher studies leading to \_\_\_\_\_ degree.

1.	Full Name of the Candidate	:	
2.	Department	:	
3.	Registration Number	:	
4.	Field of studies		
	(i) Major field	:	
	(ii) Supporting field	:	
5.	Period of semester	:	
6.	Date & Year of Admission	:	
7.	Date & Year of Completion	:	
1.	The courses taken and grade points obtained with CGPA at the end of _____	:	
2.	Progress in Report of thesis and research work	:	
3.	Progress in the subject of qualifying/ Preliminary & Viva-voce examination	:	
4.	Progress regarding seminars and other compulsory course	:	
5.	Any other information regarding progress in training	:	
	Place : ANAND Date : / /201		Signature of Major Guide

**ANAND AGRICULTURAL UNIVERSITY**  
**B. A. COLLEGE OF AGRICULTURE, ANAND**

**FACULTY OF POST-GRADUATE STUDIES**

**Proposal for appointment of committee for Preliminary Examination**

Name of the Candidate: \_\_\_\_\_  
(Surname) (First) (Second)

Registration No. : \_\_\_\_\_ Date: \_\_\_\_\_

Degree : M.Sc./M.Sc.(Agri.)/Ph.D.

Major field : \_\_\_\_\_ Supporting field : \_\_\_\_\_

**Courses successfully completed**

Course No.	Credit	Grade	When Passed	Course No.	Credit	Grade	When Passed
<b><u>Pre-requisites</u></b>				<b><u>Major field</u></b>			
<b><u>Minor ield</u></b>				<b><u>Supporting Courses</u></b>			

**Proposed Committee**

Sr. No.	Name	Designation	Address
1		Major Guide	
2		Co - Guide	
3		Member	
4		Member	
5		Member	

Place: Anand

Date: / /201

(Signature of Major Guide)

Forwarded with compliments to:

- (1) Dean, Faculty of Post Graduate Studies, Anand Agricultural University, Anand
- (2) Registrar, Anand Agricultural University, Anand – 388 110
- (3) Principal, BACA, AAU, Anand
- (4) Major Guide concerned.

**PRINCIPAL**

No.: BACA/PO/PGT/

Date: / /201

**ANAND AGRICULTURAL UNIVERSITY**  
**Faculty of Post-Graduate Studies**

College/Centre \_\_\_\_\_

**I. General Information :**

1. Name of the student :
2. Registration No. Date : \_\_\_\_\_
3. Degree for which studying
4. Major field: \_\_\_\_\_ 5. Minor field : \_\_\_\_\_
6. Supporting Subject:
7. Percentage of Courses cleared :      %

**II. Courses so far taken and grades obtained.**

Course No.	Title	Credits	Grade obtained
<b>I. Major field</b>			
<b>II Minor Field</b>			
<b>III Supporting Courses</b>			
<b>IV Pre requisite</b>			
<b>V Non Credit Compulsory Courses</b>			
<b>VI Courses yet to clear</b>			

**Title of the thesis: (Proposed) :**

Place :

Date :

(Signature of Major Guide )

**THESIS VIVA-VOCE/PRELIMINARY EXAMINATION OF M.Sc./M.Sc.(Agri.)/Ph.D. STUDENT****MAJOR FIELD:** \_\_\_\_\_**MINOR/SUPPORTING FIELD:** \_\_\_\_\_

Name &amp; full address of the Examiner: \_\_\_\_\_

in subject \_\_\_\_\_ at the Thesis Viva-Voce/Preliminary examination of Shri  
 \_\_\_\_\_ as per university appointment order No:  
 AAU/EXAM/PGE/ \_\_\_\_\_ / \_\_\_\_\_ dated \_\_\_\_\_.

1.	Honorarium for examining the thesis of M.Sc./M.Sc.(Agri.)/Ph.D. student	
2.	Honorarium for examining the thesis viva-voce examination of Ph.D. student	
3.	Honorarium for preliminary viva-voce examination of Ph.D. student	
	<b>TOTAL RUPEES</b>	
	Postage charges as per scale [where ever separately payable (Postal receipt to be attached)]	
	<b>TOTAL RUPEES</b>	
	Deduction, if any: Voucher No. _____ Rs. _____ of _____ 200 .	
	Head Chargeable	
	<b>GRANT ALLOTTED</b>	
	Total expenditure	

For M.Sc. Rs. 500/ for Ph. D. Rs 1000/-

Note: All entries in this form must be filled in by the person preparing the bill. Forms in which entry is left blank will be returned for completion to the person preparing the bill. All bill shall be receipted in advance.

(PTO)

I hereby declare that I am a resident of \_\_\_\_\_

---

situated in the republic of India in \_\_\_\_\_ state and the income tax rules in force in the republic of India applicable to me.

Date: / /201

Place:

(Signature of External Examiner)

Payment received



Counter signed for Rs. \_\_\_\_\_ (Rupees \_\_\_\_\_) only.

Date: / /201

Place:

(Signature of Major Guide)

Passed for payment for Rs. \_\_\_\_\_ (Rupees \_\_\_\_\_) only.

**PRINCIPAL  
BACA, AAU, ANAND**



ANAND AGRICULTURAL UNIVERSITY  
B. A. COLLEGE OF AGRICULTURE, ANAND

**FACULTY OF POST-GRADUATE STUDIES****REPORT ON POST-GRADUATE PRELIMINARY EXAMINATION**

Name of the Candidate: \_\_\_\_\_  
(Surname) (First) (Second)  
Registration No. : \_\_\_\_\_ Date: \_\_\_\_\_  
Degree : M.Sc./M.Sc.(Agri.)/Ph.D.  
Semester of study : \_\_\_\_\_ Attempt: First/Second/Third

The Advisory Committee hereby certify that, in their judgment, the above named student has successfully passed/failed to pass the Preliminary examination and recommended / do not recommend that this student be admitted to candidacy for the Ph.D. degree.

Sr. No.	Name	Designation	Signature
1		Major Guide	
2		Co -Guide	
3		Member	
4		Member	
5		External Examiner	

Place: Anand  
Date: / /200

**Recommendations of the Committee**

1. The candidate is given second chance.
2. The candidate is given third chance.
3. The following courses should be added to the programme of study of the candidate

Course No.	Course Title	Credit

4. The candidate is discouraged from prosecuting further studies leading of Ph.D. degree.
5. Other remarks: \_\_\_\_\_

(Signature of Major Advisor)

Forwarded with compliments to:

- (1) Dean, Faculty of Post Graduate Studies, Anand Agricultural University, Anand
- (2) Registrar, Anand Agricultural University, Anand – 388 110
- (3) Major Guide concerned.

No.: BACA/PO/PGT/

Date: / /201

**PRINCIPAL**  
B. A. College of Agriculture  
AAU, Anand – 388 110

## Seminar Hall Application Form

To,  
The Principal  
B.A. College of Agriculture  
Anand Agricultural university  
Anand

Subject: Permission to use Seminar Hall on dated\_\_\_\_\_ at \_\_\_\_\_

Respected Sir,

Kindly permit me to use seminar hall on dated \_\_\_\_\_ at \_\_\_\_\_ am/pm. It is my responsibility to switch off the AC, lights, fans except charging units for UPS. I will keep all codes of computers as usual and will **not change the computer** without the permission of hall in charge. I **will not allow other to deliver seminar without permission** and hand over the keys immediately after the completion of seminar

Thanking you

Yours faithfully

( \_\_\_\_\_ )

User/Student name

Tel/Mobile. No.

Major/Co- Guide

Tel./Mobile No.

## Seminar Hall Application Form

To,  
The Principal  
B.A. College of Agriculture  
Anand Agricultural university  
Anand

Subject: Permission to use Seminar Hall on dated\_\_\_\_\_ at \_\_\_\_\_

Respected Sir,

Kindly permit me to use seminar hall on dated \_\_\_\_\_ at \_\_\_\_\_ AM/PM It is my responsibility to switch off the AC, lights, fans except charging units for UPS. I will keep all codes of computers as usual and will **not change the computer** without the permission of hall in charge. I **will not allow other to deliver seminar without permission** and hand over the keys immediately after the completion of seminar

Thanking you

Yours faithfully

( \_\_\_\_\_ )

User/Student name

Tel/Mobile. No.

Major/Co- Guide

Tel./Mobile No.

**ANAND AGRICULTURAL UNIVERSITY  
COLLEGE OF VETERINARY SCIENCE AND ANIMAL HUSBANDR, ANAND.  
FACULTY OF POST GRADUATE STUDIES**

**SPECIAL PROBLEM RESULT**

<b>Sr. No.</b>	<b>Name of the student (Full name)</b>	<b>Registration No.</b>	<b>Topic of Special problem</b>	<b>Degree</b>	<b>Course No.</b>	<b>Credit</b>	<b>Result</b>	<b>Remarks</b>

**Signature & Name of Major/Co- Guide**

**ANAND AGRICULTURAL UNIVERSITY  
B A COLLEGE OF AGRICULTURE  
ANAND – 388 110**

**INFORMATION FORM  
(P. G. SEMINAR )**

- 1 NAME OF THE STUDENT :
- 2 REGISTRATION NUMBER :
- 3 DEGREE (M.Sc./ Ph.D.) :
- 4 MAJOR SUBJECTS :
- 5 MAJOR Guide :
- 6 Co- Guide :
- 7 COURSE NUMBER :  
(591/691/692) :
- 8 TITLE OF SEMINAR
- 9 DESIRED DATE / PERIOD :  
FOR SEMINAR

PLACE : ANAND

DATE :

(                    )  
Signature of Student

Major Guide  
(Name and Designation)

@ Co –Guide  
(Name and Designation)

@ Only if the seminar credit is of minor subject

**Confidential**

**(In triplicate)**

**B.A. College of Agriculture  
ANAND AGRICULTURAL UNIVERSITY, ANAND  
POST GRADUATE FACULTY  
THESIS RESULT**

**College: B. A. College of Agriculture**

**Degree: M.Sc./M.Sc.(Agri.)/ Ph.D.**

**Semester:**

**Year:**

**Discipline: Major:**

**Minor / Supporting :**

**Date of Thesis Submission: / /20**

Sr. No.	Name of the Student (Full Name)	Registration No.	Title of Thesis	Course No.	Credit	Result (S/DEF)	Remarks

**(Signature and Designation of Major Guide)**

No.BACA/PGT/ /2014

Anand. Date : / /2014

**Principal**

**Copy f.w.to:** The Registrar, Anand Agricultural University, Anand for information and Necessary action.

**B.A. College of Agriculture**

**Anand AGRICULTURAL UNIVERSITY, Anand**  
**POST GRADUATE FACULTY**  
**THESIS RESULT**

**College: B. A. College of Agriculture**

**Degree: M.Sc./M.Sc.(Agri.)/ Ph.D.**

**Semester:**

**Year:**

**Discipline: Major:**

**Minor / Supporting :**

**Date of Thesis Submission: / /20**

<b>Sr. No.</b>	<b>Name of the Student (Full Name)</b>	<b>Registration No.</b>	<b>Title of Special Problem</b>	<b>Course No.</b>	<b>Credit</b>	<b>Result</b>	<b>Remarks</b>

**(Signature and Designation of Major Guide)**

To  
The principal  
B. A. College of Agriculture  
Anand Agricultural University, Anand

**CONFIDENTIAL**

(To be filled in quadruplicate)

**ANAND AGRICULTURAL UNIVERSITY, FACULTY OF PG STUDIES**

**PROPOSAL FOR APPOINTMENT OF EXAMINER(S) FOR THESIS  
EVALUATION**

College: **B.A. College of Agriculture**

1. Name of the Student :  
(Capital letters) (As per registration)
2. Degree \_\_\_ Ph.D \_\_\_\_\_
3. (A) Major Field: \_\_\_\_\_
4. (B) Minor field : \_\_\_\_\_
3. Registration No. \_\_\_\_\_ , Date: \_\_\_\_\_
4. Date of passing preliminary examination: \_\_\_\_\_
5. Title of the Thesis: \_\_\_\_\_  
\_\_\_\_\_
6. Expected date of Submission of the thesis: \_\_\_\_\_
7. No. of total credit completed: \_\_\_\_\_
8. Whether following requirements are completed or not:
  - (a) Course work and other residential requirements: Yes/No
  - (b) Term granted time to time: Yes/No
  - (c) Completion of course work: Yes/No
  - (d) Submission of agreement/Surety Bond: Yes/No  
(In case of In service /Deputee trainee)
9. Proposed External Examiners for the thesis : For M.Sc. Minimum Three of which one examiner from out of state /For Ph. D Minimum Five of which Two examiner from out of state ( **Examiner Should not be repeated more than two times /year**)

Sr.no.	Name and Designation Advisory committee member	Address	Phone /Mobile No.
1			
2			
3			
4			
5			

Place: \_\_\_\_\_ Signature of Professor and Head      Signature of Major Guide

Date: \_\_\_\_\_

Copy F.W.Cs. to:

1. The Director of Research and Dean P.G. Studies, Anand Agricultural University, Anand with a request to appoint the external examiner(s) for the thesis evolution
2. The Registrar, Anand Agricultural University, Anand for further necessary action.

**PRINCIPAL**

No.

Date :    /    /20

CONFIDENTIAL

(To be filled in quadruplicate)

**ANAND AGRICULTURAL UNIVERSITY**  
**B.A.COLLEGE OF AGRICULTURE, ANAND**

***FACULTY OF POST-GRADUATE STUDIES***

**REPORT ON POST-GRADUATE Kacha bound thesis Presentation**

**Name of the Candidate** : \_\_\_\_\_

**Registration No** : \_\_\_\_\_ **Date:** \_\_\_\_\_

**Degree** : \_\_\_\_\_

**Semester of study** : \_\_\_\_\_

**The Advisory Committee hereby certifies that, in their judgment, the above named student has successfully/Not successfully presented the kacha bound thesis and therefore committee recommends / does not recommend that student can/cannot submit the thesis for further evaluation by external examiner.**

---

<b>Sr. no</b>	<b>Name</b>	<b>Designation</b>	<b>Signature</b>
<b>1</b>		<b>Major Guide</b>	
<b>2</b>		<b>Co -Guide</b>	
<b>3</b>		<b>Member</b>	
<b>4</b>		<b>Member</b>	
<b>5</b>		<b>DR` Nominee</b>	

**Place: Anand**

**Date: . . .**

**(Signature of Major Guide)**

**PRINCIPAL**

**No.:**

**Date:**

**Anand Agricultural University  
Anand – 388 110**

**Forwarded with compliments to:**

- (1) Dean, Faculty of Post Graduate Studies, Anand Agricultural University, Anand – 388 110**
- (2) Registrar, Anand Agricultural University, Anand – 388 110**



**CONFIDENTIAL**

(To be filled in quadruplicate)

**ANAND AGRICULTURAL UNIVERSITY, ANAND – 388 110**  
**FACULTY OF POST – GRADUATE STUDIES**  
**B.A. College of Agriculture, A.A.U., Anand**

**REPORT OF VIVA – VOCE ON THESIS**

1. Name of the Candidate : \_\_\_\_\_
2. Registration No.: \_\_\_\_\_ (A) Major Field : \_\_\_\_\_
3. Degree : \_\_\_\_\_ (B) Supporting Field: \_\_\_\_\_

The Examination committee hereby certify that after due consideration of the reports of the external referees on the thesis entitled: \_\_\_\_\_

submitted by the above named student in partial fulfillment of the requirements for the award of \_\_\_\_\_ Degree in the subject of \_\_\_\_\_ . The viva-voce of the candidate was subsequently conducted and that, in their judgments the candidate has satisfactorily met the requisite standard of performance for the award of the \_\_\_\_\_ degree.

The committee, therefore, recommends/does not the acceptance of thesis for the award of the degree.

<b>Sr. No</b>	<b>Name &amp; Designation</b>	<b>Signature</b>
1.		(Minor Guide)
2.		(Co -Guide)
3.		(External Examiner)
4.		(External Examiner)

Remarks : (If any) \_\_\_\_\_

Place : **Anand**

(Signature of Major Advisor)

Date : / /200

Name :

Designation :

(PTO)

//2//

## **CERTIFICATE**

Necessary corrections / Modifications have been incorporated in all the copies of the thesis as per suggestions of the external referee(s) and the members of the examination committee.

**Place : Anand**

**(Signature of Major Guide)**

**Date :        /        /201**

Name        :

Designation :

## **CERTIFICATE**

This is to certify that Shri

Registration No :

Degree :

Major field :

has submitted bound volume of thesis to the

Principal, B.A. College of Agriculture, Anand on Date \_\_\_\_\_ (In words)

\_\_\_\_\_ after incorporating all the suggestions /  
corrections indicated by the examiners.

No.:

**Place : Anand**

**PRINCIPAL**

**Date :        /        /201**

Copy forwarded for information and necessary action to:

1. The Director of Research & Dean P.G. studies, Anand Agricultural University, Anand – 388 110.
2. The Registrar, Anand Agricultural University, Anand – 388 110.

**ANAND AGRICULTURAL UNIVERSITY, ANAND – 388 110**  
**SUMMARY OF POST – GRADUATE RESULT**

1. Name of the student ;
2. Degree :
3. Registration No. :
4. Major Field of Study :
5. Minor Field of Study :
6. Title of Thesis :
7. Prelim Viva-voce :
8. Thesis Viva-voce :  
Passed on
9. Thesis Submitted on :
10. Overall Grade Point  
Average (!0.00 Basis)
11. Name of Major Guide:
12. External Examiner :
13. Major Guide`s : Necessary corrections / modifications have  
Remarks been incorporated in all the copies of thesis  
as suggested by the external referee(s) and  
the members of the examination committee.

**Dean**

**REGISTRAR**