

અનુસ્નાતક કક્ષાના ફોર્મમાં જરૂરી સુધારા વધારા કરવા બાબત...

વંચાણે લીધા: તા.૩૧/૦૭/૨૦૧૮ના રોજ વિદ્યાપરિષદની મળેલ ૪૯મી બેઠકની કાર્યનોંધના મુદ્દા નં. ૪૯.૬

જાહેરનામું

આથી સબંધકર્તા સર્વેને જાણ માટે જાહેર કરવામાં આવે છે કે, આણંદ કૃષિ યુનિવર્સિટી, આણંદની તા.૩૧/૦૭/૨૦૧૮ના રોજ મળેલ વિદ્યાપરિષદની ૪૯મી બેઠકની કાર્યનોંધના મુદ્દા નં. ૪૯.૬થી નીચે મુજબ ઠરાવ કરવામાં આવેલ છે.

"આથી ઠરાવવામાં આવે છે કે, ગુજરાત કૃષિ યુનિવર્સિટી અમલમાં હતી તે સમયે ચાલતા અનુસ્નાતક કક્ષાના અભ્યાસક્રમો માટે જરૂરી ફોર્મ (પરિશિષ્ટ-અ(૧) થી અ(૧૪)) જેવા કે, રજીસ્ટ્રેશન ફોર્મ, માઇગ્રેશન ફોર્મ, એલીજબીલીટી ફોર્મ, કેમ્પસ ફોર્મ, પ્રીલીમનરી એક્ઝામ માટેના ફોર્મ, થીસીસ ફોરવર્ડીંગ પત્ર, ઓનેરીયમ ફોર્મમાં તેમજ વર્ષ ૨૦૧૮-૧૯થી ઓનલાઇન એક્ઝામ સોફ્ટવેર અમલમાં આવતા માર્કશીટ અને ટ્રાન્સક્રીપ્ટના નમૂનામાં (પરિશિષ્ટ-બ(૧) થી બ(૧૪)) મુજબ જરૂરી સુધારા / વધારા સાથે ૧૬મી બોર્ડ ઓફ પોસ્ટ ગ્રેજ્યુએટ સ્ટડીઝ બેઠકની કાર્યનોંધના મુદ્દા નંબર ૧૬.૬થી થયેલ ભલામણ ગ્રાહ્ય રાખી વિદ્યાપરિષદ દ્વારા મંજૂરી આપવામાં આવે છે."

જેનો અમલ નવા શૈક્ષણિક વર્ષ ૨૦૧૮-૧૯ થી કરવાનો રહેશે.

જા.નં.આકૃયુ/૨જી/પરીક્ષા/પીજીટી/૨૮૦૨/૨૦૧૮
તા.૩૧/૦૮/૨૦૧૮

કુલસચિવ

નકલ સવિનય રવાના :-

૧. યુનિવર્સિટીના તમામ અધિકારીશ્રીઓ તરફ.
૨. આ યુનિવર્સિટીના તમામ આચાર્યશ્રીઓ તરફ.
૩. વિદ્યાપરિષદના તમામ સભ્યશ્રીઓ તરફ.
૪. કુલપતિશ્રીના રહસ્ય સચિવશ્રી, આ.કૃ.યુ., આણંદ તરફ.
૫. સહ પ્રાધ્યાપકશ્રી, રાજ્ય કૃષિ યુનિવર્સિટી પરિષદ, ગાંધીનગર તરફ જાણ સારું.

નકલ રવાના:-

૧. આ વિભાગની તમામ શાખાઓ તરફ.
૨. એકેડેમીક શાખા તરફ જાણ સારું. (૧૦ નકલમાં)

REGISTRATION FORM

नवा परिशिष्ट-५ (१)

ANAND AGRICULTURAL UNIVERSITY, ANAND
Faculty of Postgraduate Studies

Application for Registration as Post-Graduate Student

To
The Registrar
Anand Agricultural University
Anand

Sir,

I request you to register my name as a post-graduate student leading for the _____ Degree of the Anand Agricultural University Anand, I intent to offer myself as a candidate for the examination for that degree in the year _____.

I further declare that my name has not been registered as post-graduate student for any other degree at any other University.

The registration fee of Rs. _____ is remitted by paid in cash under Uni. Receipt No. _____ Dated _____.

Yours faithfully

Date:

(Signature of the applicant)

1. Name in full (As per Last Degree Certificate copy attached):

Personal particulars

Surname: Shri/Smt./Ms. _____

Name: _____

Father's / Husband's Name: _____

2. Full address for correspondence: _____

Email: _____

Mobile No.: _____

Aadhaar Card No: _____

Blood Group: _____

Bank Detail: Name of Bank: _____

Branch: _____

Account No: _____

IFSC Code: _____

3. Nationality: _____

4. Particulars regarding the degree examinations passed:

Name of examinations	Date of passing	Class obtained	Name of College and University	Subjects offered
1.	2.	3.	4.	5.

5. (i) The date of application for the certificate of eligibility: _____

(ii) The number and date of provisional eligibility certificate issued: _____

6. The major subject of study for the post-graduate degree for which the candidate is applying for registration: _____

7. Admission details:

1. Admitted for degree : _____

2. Admission letter / memo no. and date : _____

3. College admitted : _____

8. The name of Major Guide under whom the applicant will study:

9. The name of the institution where the applicant will study:

10. (i) Whether the fee prescribed by the university has been paid: Yes/ No

(ii) The date of payment : _____

(iii) The amount paid : Rs _____

(iv) Receipt No. and Date : _____

Certified that the above information is correct.

Place:

Date:

(Signature of the applicant)

Name of Major Guide
(Signature and Designation)

Signature
(Head of the Department)

Place:

Date:

Signature
Principal & Dean

ELIGIBILITY FORM नवा परिशिष्ट-५ (२)
ANAND AGRICULTURAL UNIVERSITY, ANAND

Application For Eligibility Certificate

N.B.:- The application must be accompanied by the prescribed fee of Rs. 200/- in cash and original Migration Certificate, and photocopies of School Leaving Certificate, Graduation Mark sheet, Provisional Degree Certificate failing which the application will not be attended to.

1. Name in full : (Beginning with Surname and in Capital letters) (As per school leaving certificate copy attached)	
2. Postal address for correspondence:	
3. Date of remitting the fee :	Date of Birth:
4. Name, occupation of the applicant's guardian and the exact relationship of the guardian to the applicant:	
5. Name of the city, town or village in which the applicant has a permanent place of residence:	
6. Year and month of passing the SSC Examination or the Matriculation Examination or SSC Examination with the name of the Board:	
7. Name of last qualifying examination passed by the applicant in another University or institution together with the name of the University or institution, the date of passing the examination and the subject in which the examination has been passed.	Examination: University: Subject: Year:
8. Name of the college last attended by the applicant in another University and whether the applicant was a student of such college for required academic years undergoing the course of instruction for the examination qualifying for admission to this University. The percentage of attendance in each subject is not required. (The period of attendance as such a college should also be specified.)	Name of the college: Period of attendance: _____ month _____ year to _____ month _____ year
9. Examination, if any, at which applicant appeared but failed to pass, with the name of the university and year	
10. College and Degree to which admission is sought in Anand Agricultural University	Degree:
	Name of College:
11. Reason for seeking admission to this university :	
12. Certificate (in original) to be attached together with a certified copy of each certificate. The original certificates will be returned with the final Eligibility Certificate.	

(1) **Migration Certificate** : Certificate from the Registrar of the University from which the applicant has passed the examination named above permitting him/her to proceed for his/her studies in Anand Agricultural University. (Original Certificate will not be returned.)

(2) **Attendance Certificate** : Certificate from the Principal of the college last attended by the participant, stating that he/she has passed the examination referred to above after the completion of the prescribed course of instruction at such College and mentioning the period of attendance of the applicant since his/her passing the last preceding university examination.

(3) **Passing Certificate** : Certificate signed by the Registrar of the last examination passed by the applicant in university stating the examination and the subject in which the examination was passed. A certificate of marks obtained by the applicant at the time of examination will not be accepted.

(4) **Character Certificate**: Certificate of good moral character from the Head of Institution last attended by the applicant.

(5) **Passing Certificate**: Certificate from the Principal to obtain provisional Eligibility Certificate.

Date:

Signature of the Applicant

No.:

Date:

Principal & Dean

- Date as entered in the record of the College or Institution last attended by the applicant.
- Payment of fees by cheque is not acceptable.
- A provisional Eligibility Certificate to join a College will be issued only on payment of the prescribed fee of Rs.100/- and on production of documentary evidence such as certificate of passing the examination issued either by the Head of Institution or the Registrar of the University.
- The statement of marks will also be accepted for Provisional Certificate.

UNDERTAKING

I, the undersigned, hereby undertake to obtain the final Eligibility Certificate by producing the following documents before the end of the first term of admission or by any other extended time limit. I fully understand that the term or terms, if any, kept by me in any constituent college will be liable to be cancelled if I fail to obtain the final Eligibility Certificate by the date prescribed.

1. Migration Certificate from the University last attended
2. Attendance Certificate
3. Passing Certificate signed by the Registrar
4. Character Certificate
5. Certificate of Marks
6. Passing Certificate from the Principal

Date:

Signature of Student

Provisional Eligibility Certificate No _____

Date: _____

Instructions to Candidates for obtaining

Eligibility Certificate

1. A student migrating from the jurisdiction of other university or statutory examining body and seeking admission in this University must apply for the Provisional Eligibility Certificate in the prescribed form along with a fee of Rs 100/-. Such fee shall not be refunded, if an Eligibility Certificate is issued to the applicant, provided, however, that a student to whom the Eligibility Certificate has been issued will not be required to pay a fresh fee if he/she desires a change over from one course to another for which he/she is otherwise eligible for admission. In case of ineligible candidates, of the fee will be refunded.
2. Students must obtain final Eligibility Certificate before the end of the first term of admission or by any other extended time limit on producing the following documents in original together with a certified typed copy of each. In case the final Eligibility Certificate is not obtained before the end of the first term of admission or by any other extended time limit, the student is liable to forfeit his/her eligibility fees and the right to appear at the university examination. His/her term or terms kept without obtaining eligibility certificates will also stand cancelled.
 - a. Migration Certificate (from the University last attended)
 - b. Passing Certificate (from the University last attended)
 - c. Attendance Certificate (Showing year and month of joining and leaving the College)
 - d. Character Certificate
 - e. Statement of Marks
3. Whenever any correspondence is made, please mention the number of your Provisional Eligibility Certificate, case number and the college to which you were admitted on Provisional Eligibility Certificate.
4. If a candidate fails to get admission in any constituent college of this University, he/she should return the Provisional Eligibility Certificate for filing the case.
5. Admission to constituent colleges is under the control of their Principals and separate application should be made to the Principal concerned. They will give admission subject to availability of seat and the relative merit of the applicant. Granting of an Eligibility Certificate by the University does not confer any right to the candidate for admission to a particular college. The certificate fee is non-refundable.

MIGRATION FORM

ANAND AGRICULTURAL UNIVERSITY, ANAND

(To be filled in by the authorities of the college last attended by the applicant in this University)

**The Registrar
Anand Agricultural University
Anand**

Sir,

I have the honour to forward herewith the application of
Mr./Kum./Ms. _____ (Reg. No. _____)

for a migration certificate. (As per school leaving certificate copy attached)

The applicant has not been rusticated or debarred by the university and I have no
objection to a migration certificate being granted to him/her by the university.

His/ her date of birth as entered in the school/college register is _____.

He/ she has been a student of the college since _____ and left in _____.

The leaving certificate was issued to the applicant on _____
and is sent herewith.

No application for a Migration certificate on behalf of this candidate was made previous
to this date.

**Principal & Dean
(Signature with Stamp)**

(To be filled in by the student)

N.B.:- The fee of Rs.200/- for a student migrating from this university to another statutory university should be sent directly to the Principal of the college or Comptroller, Anand Agricultural University, Anand by DD/Cash.

(1) Name in Full:

(Beginning with surname and in capital letters (as per School Leaving Certificate-copy attached)

(Reg. No. _____)

(2) Address:

(3) Date on which the prescribed fees of Rs.200/- is sent by/DD/Cash

(4) (a) College in which the applicant is admitted :

(b) The University to which migrated :

(5) College last attended with the date of leaving :

(6) Details of examination passed:

Name of Examination	Year	College	Class	Seat No.	Subject

- Original mark statement along with a certificate, true copy of the last examination passed by the student from this university is to be sent positively.

(7) Examination of this university, if any, with year at which the applicant appeared

(8)* (a) Date on which the leaving Certificate was applied for and
(b) The Date on which the leaving certificate was issued by the institution last attended by the applicant

(9) Other particulars if necessary.

Date : _____

(Signature of the applicant)

* If there is any period intervening between the date of application and the date of the leaving certificate issued from the institution last attended, it should be accounted for in this column.

N.B.:- (1) The Migration Certificate cannot be issued unless the leaving certificate issued by the institution with a copy thereof is received by the university with the application.

(2) The application must be accompanied by the prescribed fee of Rs. 200/- in cash and the certificates in original and certified copy of each. Application without the certificate and with a certified copy and fee will not be attended to.

Instruction to candidates for obtaining Migration Certificate

- (1) A student migrating from this university will be issued a migration certificate on applying in a prescribed form through the Principal of his/her college or institution last attended on paying a fee of Rs. 200/- which will in no case be refunded if the Migration Certificate applied for is issued once in favour of the student concerned.
- (2) Each application form for Migration Certificate must be accompanied by a transfer certificate/ leaving certificate duly signed by the Principal of the college last attended by the applicant, and original statement of marks obtained at the examination at which he/she appeared last and certified copy thereof.
- (3) A duplicate Migration Certificate will be issued on applying in a prescribed form through the Principal of his/ her college or institution last attended on paying a fee of Rs. 200/-.

CAMPUS FORM
ANAND AGRICULTURAL UNIVERSITY, ANAND
Faculty of Post-Graduate Studies

College : _____

Form for Certification of the Postgraduate Student

1. (a) Full Name of the Student : _____
 (In capital letters) (Surname) (First) (Second)

(b) Permanent Address : _____

Email: _____ Mobile No.: _____

2. Registered for : _____ degree

3. Registration No. : _____

4. Fields of Study :

(a) Major field : _____ (b) Minor field : _____

5. Courses attended by the student during his/her Undergraduate / Postgraduate Studies :

First Year

Semester I					Semester II				
Sr. No.	Course or Subject	Credits/Week			Sr. No.	Course or 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 or Subject	Credits/Week			Sr. No.	Course or 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.				

Third Year

Semester V					Semester VI				
Sr. No.	Course or Subject	Credits/Week			Sr. No.	Course or 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.				

Fourth Year

Semester VII					Semester VIII				
Sr. No.	Course or Subject	Credits/Week			Sr. No.	Course or 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.				

Fifth Year

Semester IX					Semester X				
Sr. No.	Course or Subject	Credits/Week			Sr. No.	Course or 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.					
3.					

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.					

Total _____

(c) Courses under the Minor field

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

Total _____

(d) 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 _____

(e) Credit requirement for Thesis: _____

(f) Compulsory Non-credit Courses: _____

Total (a + b + c + d + e + f) Credits: _____

Approval of the Advisory Committee:

Name	Designation & Address	Signature
1. Major Guide		
2. Minor Guide		
3. Member		
4. Member		
5. Member		

Note:- If additional member is required in the advisory committee as per common PG Regulations (2016-17)-Item 31.2, give brief justification.

Signature of Major Guide

Signature of Head of the Department

**Signature of Principal & Dean With
Stamp**

**Approved by Director of Research &
Dean PG Studies**

F.W.Cs. to:

- (i) The Dean, Faculty of Postgraduate Studies, Anand Agricultural University, Anand
- (ii) The Registrar, Anand Agricultural University, Anand
- (iii) Principal, _____
- (iv) Major Guide
- (v) Student concerned

ANAND AGRICULTURAL UNIVERSITY, ANAND

Faculty of Post-Graduate Studies

College _____

Particulars of the student to conduct Qualifying (Preliminary) Examination

I. General Information:

1.	Name of the student		
2.	Registration No.		
3.	Registration Date		
4.	Degree in which Studying		
5.	Major Subject		
6.	Minor Subject		
7.	Date of Clearing Compulsory non-credit course(s)		

II. Courses so far taken and grades obtained:

Course No.	Title	Credits	Grade obtained
I. Major Field			
II. Minor Field			
III. Allied Field			
IV. Courses currently registered			
V. Courses yet to clear			

Title of the thesis: (Proposed):

Place:

Date:

(Signature of Major Advisor)

ANAND AGRICULTURAL UNIVERSITY, ANAND

Faculty of Post-Graduate Studies

College: _____

Permission Letter No & Date (from Director of Research & Dean PG Studies: _____)

Order of appointment of examination committee for Preliminary Viva-voce of Post-graduate students

1. Name of the student : _____
2. Registered for (Degree) : _____
3. Registration No. : _____ Date: _____
4. Major field of study : _____
5. Minor field of study : _____
6. Trial of preliminary Examination : First/Second/Third

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

The members listed above are hereby appointed for conducting the Viva-voce of the candidate. The Major Guide is requested to arrange for the Viva-voce and send the report in quadruplicate as soon as the examination is over.

No.: _____

Date: _____

Principal & Dean

Copy F.W.Cs. for necessary action to :

- (a) _____ Major Guide
- (b) _____ Minor Guide
- (c) _____ Member
- (d) _____ Member
- (e) _____ Member

Copy F.W.Cs. for information to :

1. Director of Research & Dean P.G. Studies, Anand Agricultural University, Anand
2. Registrar, Anand Agricultural University, Anand

ANAND AGRICULTURAL UNIVERSITY, ANAND
Faculty of Post Graduate Studies

College: _____

Form for conducting Qualifying (preliminary) examination of the post graduate student

To,

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

Dear Colleagues,

Please refer the Order No. _____ Dated _____ from the Principal/Registrar _____, regarding appointment of Examination Committee for conducting the Qualifying (preliminary) examination of Shri/Mrs./Ms _____ for _____ Degree.

In this connection, I am to inform you that the preliminary examination viva-voce of above student is scheduled to be held on _____ at _____ a.m./p.m. in _____.

You are therefore requested to make it convenient to remain present.

The particulars of the student are given.

No :

Place : _____

Date : _____

(Signature of Major Guide)

Copy F.W.Cs to:

1. Principal & Dean of the Concerned College
2. Head of the Concerned Department

Cop to:

All the Committee Members

Confidential

(To be filled quadruplicate)

ANAND AGRICULTURAL UNIVERSITY, ANAND

Faculty of Post-Graduate Studies

College: _____

Report on Post Graduate Qualifying (Preliminary) Examination

Name of the candidate :
 (Capital letters) (Surname) (First) (Second)
 Registration No. :
 Degree :
 Current Semester : Attempt:

The Advisory Examination Committee hereby certifies that, in their judgement, the above named student has successfully passed/failed the qualifying (preliminary) examination and recommend/do not recommend that this student be admitted to candidacy for the _____ degree

Name	Signature	Advisory Committee
		Major Guide, Chairman
		Minor Guide
		Member
		Member
		Member

Place:

Date:

Recommendations of the Committee

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

No. of course	Title of the course	Credits
(i)		
(ii)		

- The candidate is discouraged from proceeding further studies leading to _____ degree.
- Other remarks :

(Signature of Major Guide)

(Signature of Head of Department)

Forwarded with compliments to :

- The Dean, Faculty of Post-Graduate Studies, Anand Agricultural University, Anand
- The Registrar, Anand Agricultural University, Anand for necessary
- The Major Guide

Ref. No.:

Place & Date:

Principal & Dean

ANAND AGRICULTURAL UNIVERSITY, ANAND
Faculty of Post Graduate Studies

College: _____

Proposal for Appointment of Examiners for Thesis Evaluation

1. Name of the candidate : _____
(As per registration) (Capital letters)
2. Degree: _____
3. (A) Major Subject: _____
(B) Minor Subject: _____
4. Registration No. _____ Date : _____
5. Title of the Thesis: _____

6. Expected date of submission of the thesis: _____
7. No. of total credits completed: _____
8. Whether following requirements are completed or not:
- (a) Course work and other residential requirements : Yes/No
(b) Term granted time to time (if applicable) : Yes/No/NA
(c) Passing of preliminary examination : Yes/No
(d) Completion of course work : Yes/No
(e) Submission of agreement/Surety Bond : Yes/No/NA
(in case of in-service)

9. Proposed External Examiners for the thesis:

Sr. No.	Name & Designation	Address
1		
2		
3		

Signature of Major Guide

Signature of Head of the Department

Principal & Dean

No.: _____

Date: _____

Copy F.W.Cs. to:

- The Director of Research and Dean PG Studies, Anand Agricultural University, Anand
- The Registrar, Anand Agricultural University, Anand, with a request to appoint the external examiners for the thesis
- The Major Advisor concerned

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

College: _____

No. AAU/

Dt. / /

By Registered Post Parcel

To,

Subject: Submission of thesis of PG Student Shri/Mrs./Ms _____
(Registration No. _____) for evaluation.**Reference:**

Dear Sir,

With reference to subject cited above, I am sending herewith a copy of thesis entitled

submitted by Shri/Mrs./Ms _____ (Registration No. _____)

You are requested to examine the thesis and submit **typed evaluation report** to the **Registrar**, Anand Agricultural University, Anand-388110, Gujarat, within 4/6 weeks (4 weeks for Master's or 6 weeks for Doctorals) of the date of the receipt of thesis and a copy of the **evaluation report** to the **Director of Research & Dean PG Studies**, Anand Agricultural University, Anand-388110, Gujarat.

The remuneration bill (in duplicate) duly filled in is enclosed herewith. You are requested to send the **thesis, remuneration bill** (in duplicate) duly signed by you and a copy of **evaluation report** to me under intimation to The Registrar, Anand Agricultural University, Anand-388110.

The pro forma of thesis evaluation report is enclosed herewith for information. Further you are requested to ensure that strict secrecy about all the work and correspondence concerning the examination is maintained and all rules and conventions pertaining to the examination are strictly observed.

Encl: As above.

Yours faithfully

Principal & Dean

Copy F.W.Cs. to:

1. The Director of Research & Dean PG Studies, Anand Agricultural University, Anand
2. The Registrar, Anand Agricultural University, Anand

THESIS EVALUATION REPORT FOR DOCTORATE DEGREE

1. Name of the candidate :
2. Registration No :
3. Degree :
4. Title of the thesis :

DETAILED REPORT

1. **Technical Evaluation of Thesis**
 - (A) Review of Literature :
 - (B) Research Technique or Methodology and approach :
 - (C) Results and their interpretation :
2. **Presentation of data**
 - (A) Clarity of expression :
 - (B) Tabulation and summarization of data :
 - (C) Illustrations, curves, histograms, graphs, photographs etc: :
3. **Language and Grammar**
 - (A) Correctness :
 - (B) Punctuations etc. :
 - (C) Suggested improvements :
4. **Detailed Report** :
- (Enclose separate sheet if required)
5. **Marks obtained by the candidate out of 10** :
6. **Conclusion** :

Recommended / not recommended for the award of the degree of _____

Signature
(with full Name, Designation & Address)

THESIS EVALUATION REPORT FOR MASTER DEGREE

1. Name of the candidate :
2. Registration No :
3. Degree :
4. Title of the thesis

DETAILED REPORT

1. **Technical Evaluation of Thesis**
 - (A) Review of Literature :
 - (B) Research Technique or Methodology and approach :
 - (C) Results and their interpretation :
2. **Presentation of data**
 - (A) Clarity of expression :
 - (B) Tabulation and summarization of data :
 - (C) Illustrations, curves, histograms, graphs, photographs etc: :
3. **Language and Grammar**
 - (A) Correctness :
 - (B) Punctuations etc. :
 - (C) Suggested improvements :
4. **Detailed Report** :
- (Enclose separate sheet if Required)
5. **Conclusion** :

Recommended / not recommended for the award of the degree of _____

Signature
(with full Name, Designation & Address)

ANAND AGRICULTURAL UNIVERSITY, ANAND
Faculty of Post Graduate Studies

College: _____

Thesis Evaluation / Viva-voce/ Qualifying (Preliminary) examination of _____
(Registration No. _____)

Major Subject: _____

Minor Subject: _____

Name & Address of Examiner

In the subject: _____ at the thesis / viva-voce/ Preliminary examination
of Shri/Mrs/Ms _____

University Appointment Order No. AAU/ REG/Exam/PGT/

Sr. No.	Particulars	Rs.
1.	Honorarium for examining the Thesis of _____ student	
2.	Honorarium for Thesis, Viva-voce examination of _____ student	
3.	Honorarium for Preliminary Viva-voce examination of _____ student	
	Total	
4.	Postage Charge (Postal receipt to be attached)	
5.	Deduction if any Voucher No: _____ Rs. _____ of dated _____	
	Grand Total	

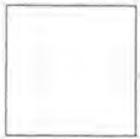
Note: All entries in this form must be filled in by the person preparing the bill. Forms in which entry is left blank will be returned for completion to the person preparing the bill. All bills shall be receipted in advance.

I herewith declare that I am a resident of _____ situated in the Republic of India in _____ state and income rules in force in the republic of India are applicable to me.

Date:
Place:

(Signature of External Examiner)

Payment received



Countersigned by: _____

Date:
Place:

(Signature of Major Guide)

Head Chargeable : _____

Grant Allotted : _____

Amount of this Bill : _____

Total Expenditure including this Bill : _____

Balance : _____

Date:
Place

Principal & Dean

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(To be filled in quadruplicate)

ANAND AGRICULTURAL UNIVERSITY, ANAND
Faculty of Post Graduate Studies.

College/Centre: _____

REPORT OF VIVA-VOCE THESIS

- (1) Name of the candidate : _____
 (As per Registration)
- (2) Registration No. : _____
 (A) Major Field: _____
 (B) Minor Field: _____
- (3) Degree : _____

The Examination Committee hereby certifies that after due consideration of the report/s of external referee/s on the thesis entitled:

submitted by the above named student in partial fulfillment of the requirements for award of _____ Degree in subject of _____, the Viva-voce of the candidate was subsequently conducted and that, in their judgment, the candidate has satisfactorily met/failed to meet the requisite standards of performance for the award of the _____ degree.

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

Name	Signature	
1. _____	_____	(Major Guide)
2. _____	_____	(Minor Guide)
3. _____	_____	(External Member)
4. _____	_____	(External Thesis Examiner for Ph.D)

Remarks: _____

(Signature of Major Guide)

Place:
Date:

CERTIFICATE

1. 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:

(Signature of Major Guide)

Date:

CERTIFICATE

This is to certify that _____ Registration No. _____, Degree: _____, Major Field _____ has submitted bound volume of Thesis to the Principal of _____ on _____ (in words _____) after incorporating all the suggestions, corrections indicated by the examiners.

This is to certify that the candidate has completed all the requirements for the said degree .

Principal & Dean

No:

Date:

Copy forwarded for information and necessary action to:

1. The Director of Research & Dean PG Studies, Anand Agricultural University, Anand
2. The Registrar, Anand Agricultural University, Anand
3. Major Guide, _____