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**Doctoral Advisory Committee (DAC) Members**

*(To be submitted along with PhD Registration Application /change of DAC members)*

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| **REGISTRATION NUMBER:**  **NAME OF THE CANDIDATE:** | | | | |
|  | | **Name, Designation, Department, Institute, Place** | **Email** | **Contact Number** |
| **DIRECTOR/ NOMINEE** | |  |  |  |
| **ACADEMIC DEAN** | |  |  |  |
| **RESEARCH GUIDE**  **(With Designation)** | |  |  |  |
| **RESEARCH CO-GUIDE**  **(With Designation)** | |  |  |  |
| **SUBJECT EXPERTS :** | | | | |
| **EXTERNAL MEMBER**  **(With Designation)** | **1.** |  | | |
| **2.** |  | | |
| **INTERNAL MEMBER**  **(With Designation)** | **1.** |  | | |
| **2** |  | | |

|  |  |
| --- | --- |
|  |  |
| **Director**  **(Name, Seal & Signature)** | **Guide**  **(Name & Signature**) |