

ભકતકવિ નરસિંહ મહેતા યુનિવર્સિટી, જુનાગઢ

(ગુજરાત પબ્લિક યુનિવર્સિટીઝ અધિનિયમ નં. ૧૫/૨૦૨૩)







Annexure-3

Referee Panel List Proforma

Date:

Full Name of Research Supervisor:	
Name of the Dept/College:	
Address of the Dept./College	
Taluka:	District:
Pin Code:	
Mobile No.:	
Email ID:	

To The Registrar Bhakta Kavi Narsinh Mehta University Junagadh.

Sub: Submission of six names of referees for evaluation of Ph.D.Thesis of my Research Scholar.

1)	Name of the Research Schola	r:
2)	Registration No.& Date	:
3)	Subject	:
4)	Faculty	:
5)	Title of the Thesis	:

- 6) Ten copies of Synopsis are submitted on:
- 7) The language of the thesis is:



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BHAKTA KAVINARSINH MEHTA UNIVERSITY, JUNAGADH [Gujarat Public Universities Act No. 15/2023]

Address (with pincode) of the Name & Contact details of Ph.D. Remark by Hon. SN District State Vice-Chancellor Referees Institute/Dept./College 1. Surname: Name: Father/Husband's Name: Designation: Mobile No.: Email: Surname: Name: Father/Husband's Name: Designation: Mobile No.: Email: 3. Surname: Name: Father/Husband's Name: Designation: Mobile No.: Email: Surname: Name: Father/Husband's Name: Designation: Mobile No.: Email: 5. Surname: Name: Father/Husband's Name: Designation: Mobile No.: Email: Surname: 6. Name: Father/Husband's Name: Designation: Mobile No.: Email: **Instructions:** 1) It is mandatory to submit six names of referee in this format. 2) Out of six referees, three should be from outside Gujarat State. Signature of the Research Supervisor with Stamp 3) Write 'Referee Panel Names' on the seal pack cover. 4) Write name of the student, guide and subject on the cover. FOR OFFICE USE ONLY f

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As per BKNMU Ph.D. Ordinance No.: O.Ph.D. 16.5, the above referee panel is approved today in the meeting				
Board of Study held on	for the subject of			
	Name of the Chairman of BoS:			
	Signature:			