



ਮਹਾਰਾਜਾ ਰਣਜੀਤ ਸਿੰਘ ਪੰਜਾਬ ਟੈਕਨੀਕਲ ਯੂਨੀਵਰਸਿਟੀ, ਬਠਿੰਡਾ
MAHARAJA RANJIT SINGH PUNJAB TECHNICAL UNIVERSITY BATHINDA

(Established by State Govt of Punjab vide Punjab Act No 5 of 2015 & under section 2(f) of the UGC Act at SNo 428)

DABWALI ROAD, BATHINDA (Punjab) - 151 001

CERTIFICATION & SUPERVISOR/CO-SUPERVISOR CONSENT
(To be submitted by the candidate while requesting PhD Supervisor Allocation)

Certified that:

- I hereby submit my consent to act as supervisor/co-supervisor of the candidate _____
D/S/o Sh. _____ Enrollment No _____
for Ph.D. research work under the FACULTY of _____
in the DISCIPLINE _____ of MRSPTU, Bathinda.
- I do not have any close relationship with the candidate.
- I am already approved by MRSPTU, for supervising Ph.D. research candidates in the
FACULTY of _____.
- I am serving as a REGULAR faculty since _____ (date of joining in the
present institute) and presently serving as _____ (Professor/ Associate Prof/
Assistant Prof) in the _____ (name of Department) at
_____ (name of the institute) affiliated to MRSPTU.
- I am at present a Supervisor/Co-Supervisor for the following _____ number of
Ph.D.candidates. (Candidature shall remain in force till the successful defense of Thesis)

| SNo | Enrollment No | Name of PhD candidate | Affiliating University | Supervisor/ Co-supervisor | Name of Other Supervisor/Co-supervisor (if any) |
|-----|---------------|-----------------------|------------------------|---------------------------|---|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
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| 6 | | | | | |
| 7 | | | | | |

In addition to the above, I agree to serve as supervisor/co-supervisor for Mr. / Ms. _____

6. Date of my Superannuation is _____

Date:

Name & Signature of Supervisor: _____

Designation: _____

MRSPTU Supervisor-id: _____

E-mail I.D.: _____

Institute: _____

This Institute has no objection to PhD supervision/Co-supervision of _____ (name of the PhD candidate to be registered under MRSPTU, Bathinda) by Dr _____ (name of Faculty), who is a REGULAR _____ (designation) in this **PG level Institute** _____ (name of the Institute) affiliated to _____ (name of the University).

Name & Signature of Principal (With Seal)

(Where supervisor/co-supervisor is working)

Date: