## FINAL THESIS SUBMISSION FORM

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3. **Date of Registration**: ..............................................................

4. **Discipline/Subject**: .................................................................

5. **College/Department/Centre**: ....................................................

6. **Approved Title of Thesis (BLOCK LETTERS)**: 
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7. **Any IPR involved in the thesis (If yes, please submit a copyright certificate separately)**:
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**CERTIFICATE**

Certified that I have incorporated all the corrections and modifications suggested by the External Examiners; suggestions and observations given by the II Doctoral Committee and the University Research Council.

**Date:** __________  
**Signature of candidate:** __________

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**ENDORSEMENT BY THE RESEARCH SUPERVISOR(S):**

This is to certify that Mr./Ms. ................................................................. has incorporated all the suggestions and observations in his/her thesis and the final thesis is recommended hereby for submission to Srinivas University.

**Signature of the Supervisor**  
**Name** .................................................................  
**Address** .................................................................  
**Date:** ____________________________

**Signature of the Co-Supervisor**  
**Name** .................................................................  
**Address** .................................................................  
**Date:** ____________________________
FORWARDING TO ‘COE’ BY THE COLLEGE/DEPARTMENT/CENTRE

Certified that Mr./Ms. .......................................................... has incorporated all the corrections and modifications made by the External Thesis Examiners; suggestions and observations given by the Oral Defence Committee and the Research Degree Committee, to the satisfaction of the CRC/DRC. As such, the thesis is recommended for final submission for the award of PhD degree at the next convocation.

Signature of Director/Dean/Head (with seal)  ____________________________________________

Name  ____________________________________________

Date: College/Department/Centre