



ACADEMIC OFFICE

NATIONAL INSTITUTE OF TECHNOLOGY

TIRUCHIRAPPALLI - 620 015, TAMIL NADU, INDIA

REQUISITION FOR THE CONDUCTION OF VIVA VOCE EXAMINATION WITHIN 2 WEEKS

Name of the Student	
Roll Number	
Department	
Type of Registration	INSTITUTE SCHOLARSHIP (HTRA) / OTHER FELLOWSHIP (QIP / ICCR / TEQIP / JRF / CSIR / DST / DAE / NBHM / etc.) / PROJECT / NON-STIPENDIARY
Date of Registration	
Title of the Thesis	
Date of Final DC meeting	
Name of the Research Guide	
Name of the Co-Guide (if any)	
Name of the External Co-Guide (if any)	
Name of the Chairperson	
Date of Final Viva Voce Examination	
Reason for Chairperson (DC)	Unavailable (both online / offline mode) due to an emergency / Absence from headquarters during the Ph.D. viva voce examination
Alternate Chairperson (Professor / from Institute) (Name and Department)	

Names & Signature of Guide and Chairperson (DC)

Research Guide(s)	Signature with date:	
	Name:	
Chairman, DC	Signature with date:	
	Name:	

[Approval]

Dean (Academic) / Director