



INTEGRAL UNIVERSITY, LUCKNOW
(Ph.D. Thesis Submission Form)

1. Name of Candidate:
2. Department:
3. Faculty:
4. Enrollment No. & Date of Registration:
5. Name of Supervisor:
6. Name of Co-Supervisor(s), if any:.....
7. Title of the Thesis:
8. No. of research paper(s) published /accepted with MCN (Attach copies of complete publications):
9. I undertake that the remaining research work of thesis will be published within a period of 1 year with the due credit to the Integral University and its Supervisor(s)
10. I certify that no figures/tables have been reproduced in the thesis without permission from the respective copyright owners.
11. I hereby submit 1 copy each of the spiral bound thesis, summary & a soft copy of the thesis on CD.

Date: _____ **Signature of the Candidate** _____

To be filled by the Supervisor(s)

12. Recommendation (Boxes not to be left empty. Either tick or cross the boxes.)
- Certified that all necessary approved objectives have been completed.
 - Recommended for Thesis Submission.
 - Certified that no figures/tables have been used in the thesis without permission from the respective copyright owners.

Signature _____ **Signature**
Co-Supervisor(s) _____ **Supervisor** _____

Signature _____ **Signature**
Head of the Department _____ **Dean** _____

- PhD Scholar has been permitted to deposit the fee for Thesis Submission & Plagiarism Check.

Signature
RDC Chairman

Clearance from Accounts Department

- Fee Clearance Status

Signature
Accounts Department

Research and Development Office

- Panel of Examiners received on.....
- Plagiarism checkCertificate of Supervisor Yes No
(Certificate of Supervisor confirming the removal of Plagiarism from the thesis.)
- English Language.....
- Thesis (Four spiral bound thesis, four copies of summary, and softcopy of thesis and summary on two CDs) received on

- **Comments of RDC Chairman:-**
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Date: _____ **Signature**
_____ **RDC Chairman** _____