



Guru Nanak Dev Engineering College, Ludhiana.

(An Autonomous College u/s [2(f) and 12(B)] of UGC Act 1956)

AICTE Approved, NBA Accredited Courses, Punjab Govt. Aided Status,
Affiliated to Punjab Technical University, Jalandhar, ISO: 9001:2008 Certified.



EXAMINER'S REPORT

Name of Course

Name of Candidate.....

Father's Name.....

University Roll No.

Title of Thesis.....

1. (a) Whether you recommend the acceptance of the thesis for the award of Master of Technology Degree Yes / No _____

(b) If "YES" with or without modifications (Please do make specific recommendations).

2. Whether you recommend resubmission of the thesis after revision (Please give details suggesting specific improvements for the purpose).

3. (a) Whether you recommend rejection of the thesis? Yes / No _____

(b) If yes, please state reasons in brief.

4. Whether the thesis merit distinction. Yes / No _____

EXAMINER'S REPORT (After conducting viva - voce)

(The examiner is requested to give his / her detailed report below or in separate sheet)

(Signature of External Examiner)

(Signature of Internal Examiner)

Name : _____

Name : _____

Designation : _____

Designation : _____

University / College / Instt. : _____

College / Instt. : _____

Place : _____

Date : _____

- Distinction will be awarded on the discretion of External Examiner subject to % age of marks obtained is 75% or more and all theory papers must be cleared in First attempt.

Note : Please send this report in sealed envelope with seal of external & internal examiners along with a copy of thesis to the college.



Guru Nanak Dev Engineering College, Ludhiana.

(An Autonomous College u/s [2(f) and 12(B)] of UGC Act 1956)

**AICTE Approved, NBA Accredited Courses, Punjab Govt. Aided Status,
Affiliated to Punjab Technical University, Jalandhar, ISO: 9001:2008 Certified.**



RECEIPT

Received Rs. 2000/- (Rupees two thousand only) on account of conducting Viva-Voce examination of _____ Univ. Roll No. _____ a student of Master of Technology (_____) full-time / part-time on _____.

I will pay income tax on the above said amount as per Income Tax rules.

Signature of External Examiner

Name _____

Designation _____

Address _____
