



# THESIS VIVA FORM

ABBOTTABAD UNIVERSITY OF SCIENCE & TECHNOLOGY

## SCHOLAR INFORMATION

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Scholar's Name:

Roll No.:

CNIC:

Degree Program: MPhil:

PhD:

BS:

Other:

Degree Title:

Name of Supervisor:

Designation:

Faculty :

Department:

Thesis Title:

## PROPOSED EXAMINERS

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### Examiner 1

Name:

Designation:

Postal Address:

### Examiner 2

Name:

Designation:

Postal Address:

\_\_\_\_\_  
Chairman

\_\_\_\_\_  
Controller of Examinations

Examiner 1

Examiner 2

\_\_\_\_\_  
Vice Chancellor

### CHECKLIST:

1. Correction Certificate from supervisor
2. Corrected Copy of thesis