

SHRI RAMASAMY MEMORIAL UNIVERSITY SIKKIM

LIST OF PANEL MEMBERS OF DC

Name of the Research Scholar :

Research Topic :

**(Abstract of topic duly signed by
the supervisor should be enclosed)**

Name of the Supervisor :

Sl. No.	Name with full and correct postal address of the subject experts in the relevant area of research	Area of Research in Ph.D.
1.	Name : Designation : Department : Address : Email: _____ Mobile: _____	
2.	Name : Designation : Department : Address : Email: _____ Mobile: _____	
3.	Name : Designation : Department : Address : Email: _____ Mobile: _____	

4.	Name : Designation : Department : Address : Email: _____ Mobile: _____	
5.	Name : Designation : Department : Address : Email: _____ Mobile: _____	
6.	Name : Designation : Department : Address : Email: _____ Mobile: _____	

HOD

(Signature with name and Seal)

SUPERVISOR

(Signature with name)