

## FORM FOR CONSENT OF PH.D. GUIDE & PH.D. STUDENT

### CONSENT OF PH.D. GUIDE

With reference to the above-mentioned subject, I wish to inform you that I am willing to accept Mr./Ms. \_\_\_\_\_ as my Ph.D. student, and for guiding his/her research work leading to Ph.D. degree of The Assam Royal Global University, Guwahati. I will guide him/her for the entire duration of his/her research work and will supervise his/her work throughout the research process.

Signature: \_\_\_\_\_

Name of the Guide: \_\_\_\_\_

Name of School: \_\_\_\_\_ Department: \_\_\_\_\_

Date: \_\_\_\_\_ Place: \_\_\_\_\_

### CONSENT OF PH.D. STUDENT

With reference to the above mentioned subject, I hereby confirm that I am willing to pursue my Ph.D. under the guidance of Prof./Dr. \_\_\_\_\_ and undertake the research work leading to Ph.D. degree of The Assam Royal Global University, Guwahati. I have read, understood, and agree to the rules and regulations of the Ph.D. programme offered by The Assam Royal Global University, Guwahati. I have also discussed my Interest Area of Research with my Guide and have clarified all the points.

The proposed Thesis title of my research is: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_

Name of the Ph.D. Student: \_\_\_\_\_

Name of School: \_\_\_\_\_ Department: \_\_\_\_\_

Area of Research: \_\_\_\_\_

Date: \_\_\_\_\_ Place: \_\_\_\_\_

### Forwarded by HOD

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Name of School: \_\_\_\_\_ Department: \_\_\_\_\_

Date: \_\_\_\_\_ Place: \_\_\_\_\_