



National Institute of Technology Manipur

FORM: 3

COMPREHENSIVE EXAMINATION

FIXATION

(To be submitted one month prior to the date of examination)

DEPARTMENT OF

Name of the Student	Enrollment No.	Date of Registration

Thesis Supervisor(s)	Date of Examination
1.	
2.	

DOCTORAL COMMITTEE

Sl. No.	Name	Department	Signature
1			
2			
3			
4			
5			
6			
7			

Chairman, DPPC

Chairman, IPPC

Note: After signature of the Chairman, IPPC, original to be kept in the personal file of the student and a photocopy copy will go to the Supervisor, department.