

**THE NORTHCAP UNIVERSITY**  
**Ph.D. Viva-Voce Evaluation Report**

1. Name of Scholar (in block letters).....
2. Father's Name.....
3. NCU Regd. No. ....
4. Date of Registration.....
5. Date of Birth.....
6. School/Deptt.....
7. Title of the Thesis (in block letters).....  
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.....
  
8. Members of the Viva-Voce Committee:
  - 1.....
  - 2.....
  - 3.....
  - 4.....
  - 5.....
  
9. Date and Time of Viva-Voce Examination:
  
10. Recommendation of the Final Ph.D. Viva-Voce Committee (Report enclosed):
  
11. Recommended for award of PhD (Y/N): .....

**Signatures of Viva-voce committee members:**

Member 1                      Member2                      Member3                      Member4                      Member5

The required three number of hard bound copies of the Ph.D. thesis cleared by the examiners submitted by Mr./Ms. .... along with a CD/DVD containing the soft copy of the thesis in PDF format are forwarded along with the Report of the Viva-voce examination.

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

Dean (Research) / VC appointed nominee / VC \_\_\_\_\_

Chairman, BDR  
Date: