Signature
(Name of Research Supervisor/Guide)

Shree Somnath Sanskrit University

(In compliance of the Ph.D. Regulations of Shree Somnath Sanskrit University)

Permission Form for Viva-Voce Examination (Ph.D.)

Date: To, Registrar, Shree Somnath Sanskrit University, Veraval. Sub.: Permission for Viva-Voce Examination of my research student Respected Sir, With reference to above mentioned subject, this is to inform you that my research student (Ph.D. Candidate's name) has submitted his/her Final Ph.D. Thesis entitled..... on I have received the telephonic/face-to-face news from the Research Section of the University that both the reports of external examiners of my research student are positive. Therefore, I request you to permit me for Viva-Voce Examination of my research student in the University during office hours. I have talked to the nearest Ph.D. Examiner of my research student and confirmed the date for conduction of Ph.D. Viva-Voce Examination. I further request you to arrange his/her Viva-Voce Examination in the University by way of intimating me the above mentioned day, date and time for the same. Thanking you, Yours truly, Date:

Place: