

[Form No. P-1]

## **Supervisor Consent Form for PhD Thesis**

1. Name of the student:	
2. Degree program:	3. Session:
4. Department:	5. Faculty:
6. Last Highest Degree:	7. University:
8. CGPA (Attach Result Sheet):	
	Signature of stude
9. I agree to supervise the above named	student
Name of the supervisor:	Designation:
Department:	Faculty:
University:	
	Signature of supervis
10. I agree to co-supervise the above nar	med student
Name of the co-supervisor (if any):	Designation:
Department:	Faculty:
	University:
	Signature of co-supervis
11. Head of the department:	¥
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	Signature and d