

ANNAMALAI UNIVERSITY

Annamalainagar

The supervisor shall complete and return this form including the brief academic CV for external and internal examiners to the Controller of Examinations along with the Synopsis.

exami	ners to the Controller	of Examinations along with the S	ynopsis.
Name of candidate			
Regis	ster Number		
Title of thesis			
Subje	ect area of research		
Nam	e of the Supervisor		
Name of the Department			
Mobile number			
Emai	il address		
		iners is proposed for the evaluati	ion of the above thesis. The Curriculum Vitae of each
	Interna	ational Examiners	Affiliation
1			
2			
3			
4			
5			
	Natio	onal Examiners	Affiliation
1			
2			
3			
4			

Date:

5

Curriculum Vitae of PhD Thesis Examiner

(This format should be used for each of the 10 examiners)

Full name	
Mobile number	
Email ID	
Current Academic/ Research Position & Name of Institute	
Complete Official Address	
Address for Communication (if different from above)	
Professional background / Academic / Research achievements	
Areas of Research Publications & Experience	
5 most Recent Publications (pertinent to the thesis topic to be examined)	
Ph. D. Examining experience within the past 5 years (please include the names of the universities)	
Any other information	