



GLOCAL UNIVERSITY
MIRZAPUR POLE, SAHARANPUR, (UP)

CONSENT LETTER FROM GUIDE

Ph. D.

I Dr..... Department
of.....in.....College/University
here consent to guide/ supervision Ms./Mr./Mrs.....
S/D/W/o.....for Doctor
of Philosophy (Ph.D.) degree in faculty.....
in subject..... for Glocal University, Mirzapur Pole, Saharanpur, UP.
I will abide the Ph.D. Ordinance of Glocal University, Mirzapur Pole, Saharanpur, UP.
and have the vacant seat of number of scholar as UGC prescribed standard norms.

The details are as under-

Name of Scholar _____

Father/Husband Name: _____

Registration No: _____

Faculty: _____

Subject: _____

Address: _____

Topic of Proposed Research:-

Signature of Guide
(With Seal)