REPORT OF PLAGIARISM CHECK

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| **TITLE OF THE PhD THESIS:** |
| Name of the PhD Student: |  |
| Roll Number: |  |
| Department/ Section: |  |
| Name of the Supervisor: |  |

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| The student may be allowed to submit the thesis as per the provisions of the Academic regulations.   Date Signature of the Chairperson, IPPC |

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| Date and time of Plagiarism test: |  |
| Software use for plagiarism test: |  |
| Test performed by: |  |
| Result of the test (in %): |  |
|  |  |
| Date |  | *Signature of the Authorized signatory of the Library with Seal* |
|  |  | Name: |
|  |  | Designation: |
|  |  | Department: |