**Activity Report: Masters Dissertation (Year )**

**FACULTY:**  **DEPARTMENT:**  **IQAC ACTIVITY No: SVC/2019-20/MS.Dis/Teacher name/1**

 BRIEF INFORMATION ABOUT THE DISSERTATION (CRITERION NO. –II):

* Name of the Faculty:
* Whether acted as Supervisor/Co-Supervisor:
* Name of the student:
* Affiliation of the student:
* Title of the Dissertation:
* Duration of the study:
* Date of Thesis submission:
* Brief Summary:

**Note**: Please attach the first page of the dissertation thesis bearing the title and signatures

|  |  |  |
| --- | --- | --- |
| NAME OF TEACHER & SIGNATURE | IQAC COORDINATOR (SEAL & SIGNATURE) | PRINCIPAL NAME & SIGNATURE |
|  |  |  |