## SREE CHITRA TIRUNAL INSTITUTE FOR MEDICAL SCIENCES AND TECHNOLOGY

## DIVISION OF ACADEMIC AFFAIRS

(Form No. PhD/06)

## PANEL OF EXAMINERS FOR PhD THESIS

(1. To be submitted by Research Guides only)

(2. Minimum five to six names may be given in the given format)

Name of Research Scholar	:	
Register No	:	
Topic of research	:	
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S1.	Name and Address of	Areas of expertise	Qualification		Past		Contact Number	ers	E-Mail ID
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