



# ICAR-CENTRAL INSTITUTE OF FISHERIES EDUCATION

(University under Section 3 of UGC Act, 1956)

Panch Marg, Off Yari Road, Versova, Mumbai-400 061, India



## OFFICE OF THE CONTROLLER OF EXAMINATIONS

### (STATEMENT OF Ph.D.THESIS/ M.F.Sc. PRE-SUBMISSION SEMINAR)\*

Name of Student: \_\_\_\_\_ Regn. No.: \_\_\_\_\_

Programme\*: **Ph.D./M.F.Sc.** Batch: \_\_\_\_\_

Discipline: \_\_\_\_\_

Title of the Ph.D. Thesis/ M.F.Sc. Pre-submission Seminar: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Held on (Date and time): \_\_\_\_\_

Remarks\*:

**Satisfactory/ Not Satisfactory**

Signature (with Date) of Advisory Committee Member/ Chairman/ HoD

**Member**  
Advisory Committee

**Member**  
Advisory Committee

**Member**  
Advisory Committee

**Member/Faculty**

**Member**  
Advisory Committee

**Chairman**  
Advisory Committee

**(Head of Division)**

\* Please tick correct one

To,  
The Controller of Examinations  
ICAR-CIFE, Mumbai - 400 061

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