

Thesis Title:  
Name of Candidate:  
Enrolment No:  
Department:  
Supervisor:

**Answers to Reviewers' comments by Candidate**

**Reviewer-1:** Dr.  
Professor  
Department

**Overall Comments:**

S.No.	Reviewer Comments	Answers	Page No.
1.			
2.			
3.			

**Reviewer-2:**

**Comments:**

Sl. No.	Reviewer Comments	Answers	Page No.

**Reviewer-3:**

**Comments:**

SI No.	Reviewer's comments	Answer	Page No.

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**Supervisor:**

**Comments:**

Sl. No.	Reviewer Comments	Answers	Page No.

**Co-Supervisor:**

**Comments:**

Sl. No.	Reviewer Comments	Answers	Page No.

Date:

DIT University, Dehradun