

## Permission to submit thesis

Date: \_\_\_\_\_

To,

The Dean Research & Consultancy  
DIT University, Dehradun-248009

Name of Student:

School & Department:

SAP ID:

Roll No.:

Registration No.:

Date of Registration:

Date of Open Seminar:

E-mail:

Mobile No:

I, \_\_\_\_\_, registered in the PhD program in the DIT University with above mentioned details. A **list of publications** carried out during the research duration is attached for the reference.

Sr. No.	Reference of the article	Published/ Accepted

I want to put my request to allow me to submit my PhD Thesis for the further review and evaluation process.

Yours Sincerely,

Signature of Research Scholar

Recommended by Head of the Department

Dean Research & Consultancy