



Tribhuvan University
INSTITUTE OF AGRICULTURE AND ANIMAL SCIENCE
POST GRADUATE PROGRAM
Student Thesis Advisory Committee Form

Name of the student: I.D. No.

Date of Admission:

Category of the Student: General/In-service/Nominee/Others

Degree Program:

Major Field: Minor Field:

COMPOSITION OF ADVISORY COMMITTEE:

Signature and Date:

1. Chairman.....

2. Member.....

3. Member.....

4. Member.....

5. Member.....

Proposed by: (Major Advisor)

Forward by: (Head of the department)

Recommended by: (Asst. Dean/Coordination. PGP)

Approved by: (Dean)

Date:

Seal:

1. Normally, no faculty can function as chairman of more than four students.
2. Normally, no faculty member can function as a member of the advisory committee of more than six students

CC Dean

Major Advisor:

Head of the Department:

Division of Examination Control, IAAS

Concerned Students: