Department of South Asian Studies

PhD GENERAL EXAMINATION CERTIFICATION FORM

| Student's Name | | |
|--------------------------|------|--------------|
| Examination Completed in | | Semester, 20 |
| Area of Specialization | | |
| Examiner | | |
| Primary Academic Advisor | | |
| Grade: | | |
| Remarks: | | |
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| Evaminana Sianatura | Doto | |
| Examiners Signature | Date | |