

ARUNODAYA UNIVERSITY
(Established U/S 2(f) of UGC Act. 1956)
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Consent of Guide/ Supervisor

To,

The Director (Research)
Arunodaya University
Naharlagun, Itanagar
Arunachal Pradesh

Sir,

I Dr. _____ registered guide/ supervisor for the Ph.D. programme in
the subject of _____ as per my registration no.
_____ of University.

I consented to undertake the responsibility that I shall work as Guide/ Supervisor of Mr. /
Mrs. _____ Reg No. _____ Registered as a scholar

in the subject of _____ and instruction given in the Act, Ordinance, Statutes of Arunodaya
University, Itanagar, Arunachal Pradesh.

Guide/Supervisor
(Signature with Stamp)