Proposal for approval of Tittle f	or Te	rm Paper/Dissertation
Name of the Student :		
Name of the course : LLM		
Roll No Session		
Tittle for Term Paper/Dissertation	1	
Name of the Supervisor	4	
Name of the Co- Supervisor		
Date:		Signature of the Student
Signature of the Co-Supervisor	*	Signature of the Supervisor
Remarks of Research Monitoring		
		Not Approved
	*	(Tick Appropriate Please)
Members Signatures:		
1 2	3	4