



# COMSATS University Islamabad

## Form for Approval of Synopsis

MS ☐ Ph.D. ☐

### Student's Detail

Name:	Registration No.:
Program:	Area of Specialization (if any as per approved SoS):
Department:	Campus:
Date of Admission:	Date of Synopsis submission:
Proposed Title of the Thesis: (Use title case capitalization):	

Student's signature \_\_\_\_\_

### Recommendation and approval

Recommended or approved by	Name and Designation	Signature
<b>Supervisory Committee</b>		
Supervisor		
Co-supervisor (if any)		
Member		
Member		
Member		
<b>Departmental Advisory Committee (DAC)</b>		
Verification of attached "Turnitin Report" by HoD		
Secretary DAC for all members		
Convener DAC on behalf of all members		
<b>Dean of Faculty</b>		
Dean Faculty of		
<b>Board of Advance Study and Research (BASAR)</b>		
Secretary BASAR		