

**Thesis Processing Cell**  
**Plagiarism Prevention Desk Processing Form**

**Name of the Student:** \_\_\_\_\_ **Roll No:** \_\_\_\_\_ **Email:** \_\_\_\_\_  
**Department:** \_\_\_\_\_ **Programme:** \_\_\_\_\_  
**Thesis Supervisor:** \_\_\_\_\_ **Email:** \_\_\_\_\_  
**Title of the Thesis:** \_\_\_\_\_

**Date of Submission to PPD:**

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(To be filled at the Plagiarism Prevention Desk)

**Similarity Index of the thesis is** \_\_\_\_\_.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Coordinator, Thesis Processing Cell**

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**Declaration by the Student**

I have checked the Similarity Report and am satisfied with the content of the thesis (Enclosure, if needed).

**Signature of the Student** \_\_\_\_\_ **Date** \_\_\_\_\_

**Endorsement by the Supervisor**

I have checked the Similarity Report and the similarity is at acceptable levels.

**In case the Similarity Index could not be brought down to the required 10% after removing the various sources and remains above 10%, the reasons may please be specified below (Enclosure, if required).**

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**Signature of the Supervisor** \_\_\_\_\_ **Date** \_\_\_\_\_

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The thesis may be submitted in its present form.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Dean/Associate Dean, Academic Affairs**