

## SCHOOL OF NAME DEPARTMENTOF NAME

Ref. No: KARE/School/Dept/RAC/Synopsis/Reg. No Date: DD-MM-YYYY

## **CIRCULAR**

## Ph.D. Synopsis

Name of the Scholar (Reg. No: ), a Part-Time/Full-Time research scholar, Department of Dept. Name, under the supervision of Supervisor Name, Designation, Department of Dept. Name, Kalasalingam Academy of Research and Education is presenting his/her Synopsis on the topic "TITLE OF SYNOPSIS", on Date (Day), Time at Board Room, Office of Director (Research and Development) IRC first floor-KARE.All RAC Members are invited to attend the meeting.

Supervisor Name
Supervisor and Chairman-RAC

## Copy Submitted to

- Director (R&D)
- SRC-Chairman/Dean of the School (School Name)
- DRC-Chairman/Head of the Department (Department Name)
- All RAC Members of the Scholar