

**REQUEST FOR PLAGIARISM TEST & SIMILARITY REPORT**

Name: (Please use BLOCK LETTERS)

\*Department / Center: \_\_\_\_\_

Program: ☐ M.Phil. Thesis ☐ Ph.D. Thesis ☐ M.Phil. Synopsis ☐ Ph.D. Synopsis  
☐ B.S. / Master Thesis

No. of Time Scanned: 1/2/3/4, No. of previous scan: -----

Final Year Research Paper (Master or Bachelor Students)

\*Registration No \_\_\_\_\_

\*Scholar E-Mail: \_\_\_\_\_

\*Scholar Cell No: \_\_\_\_\_

\*Supervisor Name: \_\_\_\_\_

\*Supervisor E-Mail: \_\_\_\_\_

\*Supervisor Cell No: \_\_\_\_\_

\*Thesis Title: \_\_\_\_\_

Remarks (If Any):

Dated: \_\_\_\_/\_\_\_\_/20..... \*Scholar Signature: \_\_\_\_\_

\*HOD: \_\_\_\_\_ \*Supervisor: \_\_\_\_\_

\*Dean: \_\_\_\_\_

***(Please bring soft copy of your thesis/ Project/Article with this Performa)***

*Note: "Highlighted by \* must fill"*

**For Focal Person Use Only**

No: \_\_\_\_\_

Repository Submission ID (Turnitin): \_\_\_\_\_ Similarity Index of Complete

***Signature of Turnitin Focal Person***