UNIVERSITY OF AGRICULTURE, FAISALABAD

SUPERVISOR'S CONSENT LETTER

I give	my conse	nt as s	super	visor to	the fol	lowing ca	ndidate	for Pł	D degre	ee prog	gram:	
Studen	nt's Name	:										
Father	's Name:											
1.	He/she	wi	11	carry	out	the	resear	ch	under	th	e pro	oject
	() and the research work will										be suppo	rted
	out of the said project.											
2.	He/she	will	carr	y out	the	research	under	the	schola	rship	funded	by
	(Funding agency										cy)	
3.	He/she	is	an	Intern	ational	PhD	candida	ate	under	the	scholar	ship
							(Name of Scholars					
	The und	ersigr	ned is	curren	tly sup	ervising _]	PhD
and _												
superv	isor.											
(Origin	nal signat	ure)										
Name	of Superv	visor:										
Institu	te/Departi	ment:					_					