

**DEPARTMENT OF MECHATRONICS & CONTROL ENGINEERING  
UNIVERSITY OF ENGINEERING & TECHNOLOGY LAHORE**

**REQUEST FOR M.SC./M.PHIL. THESIS SEMINAR**

Candidate's Name		
Registration No.		
Supervisor's Name		
Last date for M.Sc. Completion		
Date of approval of Research Proposal		
Thesis Title		
<b>SEMINAR ABSTRACT:</b>		
Supervisor's Signature		Date:

**FOR OFFICIAL USE ONLY:**

Date & Time:		
Venue:		

**CHAIRMAN**