



Post Graduate Program
Agriculture and Forestry University
Rampur, Chitwan, Nepal

Recommendation/Approval Form for Major Advisor

Name of Student: _____

Exam Roll No.: _____

AFU Registration No.: _____

Degree: **M.Sc.**

Faculty: **Forestry**

Session: _____

Proposed Title / Field of Interest: _____

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Signature of Student

For Office use:

Major Advisor: _____

Signature of Major Advisor: _____

Approved:

Faculty Dean (Signature & Date): _____