

Riphah College of Rehabilitation Sciences (RCRS)

Riphah WISH Campus, Street no.5, Faiz Ahmed Faiz Road, H-8/2, Islamabad.
Tel (+92-51) 4922161-5 Fax (+92-51) 492216 (Ext 237 & 208 RCRS)rcrs.research@riphah.edu.pk

Research Clearance Form

Name of the student	
CMS Number	
Name of Project: (if any)	

<u>Verification by Supervisor for completion of whole research process</u>
Remarks _____
Signature with Full Name/Stamp
Date:
<u>Verification by Libertarian for submission of Thesis copy</u>

Signature with Full Name/Stamp
Date:
<u>Verification by Research In charge</u>

Signature with Full Name &Stamp
Date: