



Agriculture and Forestry University
Faculty of Forestry
Hetauda, Makawanpur

Consent Form for Research Defense

To,
The Dean

I hereby give consent to the following student under my supervision for the final research defense of his/her bachelor research report.

Detail of the student

1. Name:
2. Registration Number:
3. Academic Year:
4. Research Title:
.....
.....
.....

.....

Signature

Advisor's Name:

Date: