



TITLE OF DISSERTATION
(Font-Times New Roman, Size-20)

Research Project

Submitted to the
DEPARTMENT OF GEOGRAPHY
ST. JOHN'S COLLEGE, AGRA
In partial fulfillment of the requirements
For the degree of

BACHELOR OF ARTS
IN
GEOGRAPHY

Submitted by
STUDENT'S NAME
B.A. VI Semester
Session 2023-24

DEPARTMENT OF GEOGRAPHY,
ST. JOHN'S COLLEGE, AGRA
DR. BHIMRAO AMBEDKAR UNIVERSITY, AGRA



CERTIFICATE

This is to certify that **Student Name**, B.A. VI Semester (session 2023-24) has carried out her/his dissertation on the topic “**Write title here in bold letter**”.

Date:

(Faculty Name)
Department of Geography
St John's College, Agra



DECLARATION

I declare that project titled **Write title in bold letter** is my research work carried out in the **Department of Geography, St. John's College, Dr. B.R. Ambedkar University, Agra.**

I further declare that to the best of my knowledge the research project does not contain any part of any work, which has been submitted for the award of any degree either in the university or any university/deemed university without proper citation.

(Student's Name)

B.A. VI Semester

Roll No:

St. John's College, Agra