

Coursework Enrollment Form

Application for Course work Registration for Ph.D. for Academic year.....

Department: Roll No./HT. No.:
 Name of the Candidate (In Block letters):
 Father's Name (In Block letters) :
 Date of Admission : Gender: Male/ Female
 Address for Communication :
 Mobile: Email ID:

Full-time/ Part-time

Topic of Research:
(In Block letters)

Sl.No.	Full Time/ Part Time	Course Name	Semester & Academic Year	Course Commencing Date

DECLARATION: The information furnished above is true to the best of my knowledge. I agree to abide by the rules & regulations governing the course. If selected, I will attend the course for the entire duration. I also undertake the responsibility to inform the Head of the Department and Dean (R&D), SR University in advance, in case I am unable to attend the course.

Place:
Date:

SIGNATURE OF THE RESEARCH SCHOLAR

Name & Sign. of the Supervisor

Name & Sign. of the Co-Supervisor

Name & Sign. of the Head of the Department

Encl.: Admission letter