

Ph.D.	FT / PT
Reg. No.	

I. Registration Details:

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		Contact No. & Email ID:	
Supervisor's Name :		Joint Supervisor's Name:	
Address :		Address:	
Contact No. & Email ID:		Contact No. & Email ID:	
Title of the thesis :			
Category at the time of Registration	PT(Int.)/PT(Ext.)/FT	Change of category if any	
Month and Year of Registration		Period of break of study granted if any	
Date of confirmation		Date of completion of minimum period	
Date of completion of maximum period		Extension of period approved (mention date)	upto:
Date of DC meeting for approval of synopsis		Date of submission of synopsis	

II. Extension of time for Thesis submission beyond 6 **months** after the submission of synopsis
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