

FORM FOR CONVERSION OF PhD REGISTRATION FROM FULL TIME TO PART TIME

Name	
Roll Number	
School	
Category	
Date of Enrolment for Ph.D.	
Reason for Conversion*	

* Attach appointment letter in case of employment furnish the following details

- (i) Name of Employer
- (ii) Date of appointment
- (iii) Attach appointment order and joining report.
- (iv) NOC from the employer permitting the student to continue in Ph.D. programme in part-time mode.

Date:

Signature of the Scholar

Recommendation of the Supervisor

The scholar has completed her two years of research, course work and successfully completed the comprehensive examination. Recommended/Not recommended for conversion from full time to part time.

Date:

Signature of the Supervisor

Remarks of the School Chair:

Recommendation of the Dean Academic:

Approved/Not approved for conversion from Full Time to Part Time.

Vice Chancellor