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| --- | --- |
| Ph.D. Research Scholar Name & University Register Number  |  |
| School & Department  |  |
| Contact Number |  |
| E-mail id  |  |
| Date of Provisional Registration  |  |
| Date of Provisional Registration Confirmation  |  |
| Registration Mode | Full-Time / Part-time  |
| Research Supervisor Name  |  |
| Co-Supervisor Name, if applicable |  |
| Name of the HOD/Dean of the department |  |
| Internal Doctoral Committee Member Name  |  |
| External Doctoral Committee Member Name  |  |
| Status of Synopsis Submission | Submitted/ Not Submitted  |
| If the synopsis is submitted, the change of title is not permitted. |
| Tick the nature of Title Change  |   | Full title Change  |
|  | Partial Modification in the existing title  |
| Current Title  |  |
| Proposed Title  |  |
| State the reason for the title change |  |
| Whether the Research Supervisor approved the title change? |  |
|  Whether the Internal DC member approved the title change?  |  |
|  Whether the External DC member approved the title change?  |  |
| Fee for the title change | INR. 2000 |
| Whether the title change fee payment completed? | Yes/ No |
| Please provide details of the fee payment |  |
| Whether the fees receipt attached? | Yes/ No  |

Research Supervisor Co-Supervisor

(Signature & Date) (Signature & Date)

Internal DC Member External DC Member

(Signature & Date) (Signature & Date)

Recommended for Submission and Forwarded

HOD/Dean of the Department

(Signature & Date)

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Whether the change of research title permitted? Yes/No

Status of Change of Research Title: Approved/ Not Approved

Follow-up Action (If any):

Follow-up Action (Status):

Note:

1. This form shall be typed and printed. Only the signature and date should be handwritten.
2. The format should not be altered. Any alteration in the format will not be accepted.
3. Times New Roman font, size 11 pt., and unbold text should be used.