Proforma VII(c)

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| Image result for karunya logo | **KARUNYA INSTITUTE OF TECHNOLOGY AND SCIENCES**(Declared as Deemed to be University under Sec. 3 of the UGC Act 1956) A CHRISTIAN MINORITY RESIDENTIAL INSTITUTIONAICTE Approved & NAAC AccreditedKarunya Nagar, Coimbatore - 641 114, Tamil Nadu, India |

**REGISTRATION RENEWAL FORM FOR PH.D. SCHOLARS**

## **ODD/EVEN: (20 /20 )**

|  |  |  |
| --- | --- | --- |
| Name in Block Letters | **:** |  |
| Registration No | **:** |  |
| Month & Year of admission | **:** |  |
| Faculty | **:** |  |
| Name of the Supervisor | **:** |  |
| Department of the Supervisor | **:** |  |
| Name of the Joint Supervisor (if applicable) | **:** |  |
| Department of the Joint Supervisor | **:** |  |
| Category of Registration | **:** |  |
| Number of Courses completed | **:** |  |
| No. of Courses registered in this semester | **:** |  |
| Date of Confirmation | **:** |  |

#### DECLARATION

I , .......................................................................... is doing Ph.D. Programme.

1. As a Full - time scholar, I state that I am not employed any where
2. As a Full - time scholar working in a project, I state that I am still employed in the project

3. As a Part time scholar, I am working as ........................................................................ at .....................................

1. As a part time scholar, I am still working in the same college as mentioned in my application form\* / the change of working place has been intimated to the office of the Director (Research)\*

#### (\* Strike out whichever is not applicable)

Date : Place :

#### Signature of the Scholar

(Name in Capitals)

#### Signature of the Joint Supervisor Signature of the Supervisor

#### (Name with Seal) (Name with Seal)