

Date:-

No Dues Form for Ph.D. Scholar

Name: _____

Father's Name: _____

Enrolment No.: _____

Course/Discipline: _____

Batch: _____ (Full Time/Part Time) _____

Signature of Candidate

Remarks: Deposition (no of Semester Fee) :.....(to be Submitted).

.....
Signature:

(Assistant Registrar/Dean Research Office)

Forwarded to Account Office:-

Deptt.	Clearance/Non Clearance	Sign.
Account Section	_____	_____

(Dean-Research & Studies)