

Date:-

Synopsis Submission:-No Dues Form for Ph.D. Scholar

Name:_____

Father's Name:_____

Student ID:_____

Course/Discipline:_____

Batch:_____ (Full Time/Part Time)_____

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

.....

Signature:**(Dean Research Office)****Forwarded to Account Office:-****Deptt.****Clearance/Non Clearance****Sign.**

Account Section

(Dean-Research & Studies)