(To be filled by the student)

1.	Name of Research Scholar:
2.	Enrollment No
3.	School
4.	Date of Registration
5.	Topic of Thesis.
6.	Name of Present Supervisor.
7.	Reason for Change of Supervisor / Addition of Co-Supervisor
	I am requesting to replace the current supervisor/co-supervisor for the reason/s stated

above. I take responsibility for any problem (including personal), which may affect the progress, quality and completion of my study, if that should occur as a result of this request.

Signature of Research Scholar Date

ſ. Dr.	c Designation			
ereby state that, I have no objection for change of guide in respect of (Ph. D. student)				
,, -			who is	
prosecuting Ph. D.	research work und	er my guidance.		
Date :			Signature Designation	
*******	******	**********	*******	
Particular of Propo	osed supervisor (s) b	by Dean/ Principal / HOD of the Sch	nool.	
Name & Designation	Department / Centre and Organization	No of Students supervising excluding this student	Signature of Supervisor	
		De	ean/ Principal /HOD	
*******	********	***********	******	
Consent of	the New Guide	Research Head of the Resear	rch Institute	
I, Dr	Designation			
nereby state that, I	have submitted wil	lingness in respect of (Ph. D. studer	nt)	
		prosecuting Ph. D. research work un	nder another guide	
who has submitted	No Objection Cert	ificate (NOC) for the change of guid	le. Ph. D. Scholar	
Date:			Signature Designation	

PRESIDENT