

APPLICATION FORM FOR EXTENSION OF TIME FOR SUBMISSION OF PH.D. THESIS (To be filled in by the student)

1.	Name :
2.	School:
3.	Department :
4.	Enrolment No.:
5.	Title of the work :
6.	Date of Registration:
7.	Name of Supervisor :
	Name of Co-Supervisor (if any)
9.	Status of Progress Reports after registration :
10.	Duration of extension of sought:
11.	Reasons for the extension sought:

	·	
		Sign of Research Scholar
	5	Sign of Research Scholar
	\$	Sign of Research Scholar
12		Sign of Research Scholar
12.	. Recommendation of Research Supervisor	Sign of Research Scholar
12.		Sign of Research Scholar
12.		Sign of Research Scholar
12.		Sign of Research Scholar
12.		Sign of Research Scholar
12.		Sign of Research Scholar
12.		Sign of Research Scholar
12.		Sign of Research Scholar
12.		Sign of Research Scholar
12.		Sign of Research Scholar
12.		Sign of Research Scholar
12.		Sign of Research Scholar
12.		Sign of Research Scholar
12.		Sign of Research Scholar
12.		Sign of Research Scholar
12.		Sign of Research Scholar
12.		Sign of Research Scholar
12.		Sign of Research Scholar

Signature of Research Supervisor
D 710D
Dean/HOD
Director Research
President
Lords University, Alwar