

**INDIAN INSTITUTE OF TECHNOLOGY ROORKEE**

- A.1 Name of the Ph.D. candidate _____ Enrollment No. _____
2. Department/Centre (i) _____ (ii) _____
(Where Enrolled) (Where Working)
3. Date of Initial Registration _____
4. Category : FTRS (IARS/EFRS/ISERS) / PTRS (P-ISIRS/P-ISERS)
5. Proposed Area of Research _____

B.1. Total No. of Credits to be completed (As per Regulation R.3.3 Table 1) : _____

2. Courses proposed to be completed [Seminar is compulsory, even if courses are waived-off]

Semester	Session	PG Course No.	Title	Credits	Remarks
		___ - 700	Seminar	02	

(Note: Relaxation in course credit requirement is admissible as per Rule R.3.2)

3. Certified that the courses as mentioned above have not been taken by me during earlier studies leading to graduate/post-graduate degrees.

Dated: _____

Signature of Ph.D. candidate

Sign C.1 if SRC has been constituted, otherwise C.2

C.1 SRC discussed candidate's educational background, research area and credit requirements and approved the contents as mentioned under point-B.

Member SRC

Member SRC

Supervisor-1

Supervisor-2

Supervisor-3

Chairperson, SRC

C.2 Recommended as above

Chairperson, DRC/CRC

HEAD OF THE DEPARTMENT/CENTRE

DATED:

FOR USE OF ACADEMIC AFFAIRS OFFICE

Checked and found okay as per Regulation / Revision is requested under

Asstt. Registrar (Evaluation)

Joint Registrar - Academics