



HINDUSTAN

INSTITUTE OF TECHNOLOGY & SCIENCE
(DEEMED TO BE UNIVERSITY)

DIRECTORATE OF RESEARCH & CONSULTANCY

Ph.D. COURSE WORK COMPLETION & TITLE CONFIRMATION FORM

Name of the Research Scholar :

Scholar's email id (official) :

Date of Birth :

Gender :

Reg. No. :

Dept. in which registered :

Category of Admission : FT / PTI/ PTE/IS

Name of the Supervisor :

Supervisor email id (Official) :

Contact Number of the Supervisor :

Title of the Research :

Course(s) Completed in the current semester

Sl. No.	Course Code	Title of the Course	Credit	Regular / Direct Study/NPTEL	Completed on (month/year)	Name of the Faculty	Signature of Faculty in-charge

Total Credits Completed:

Minimum credits required as per Ph.D. regulation:

Signature of Scholar with date

Comprehensive Viva Exam date & time:

Declaration

The above candidate has fulfilled the course work requirements for the Ph.D. programme as per the regulations and the title of research “_____” is approved by the Committee

Signature of Supervisor with date

Name:

Designation :

Signature of Ph.D. Coordinator with date

Name:

Designation :

Signature of HoD with date and seal

Name:

Designation :

Encl:

- 1. Copy of Course work result mail.**
- 2. Copy of Comprehensive Viva Circular.**