Form No: HITS/DRC/ PhD/005

HINDUSTAN
INSTITUTE OF TECHNOLOGY & SCIENCE
(DEEMED TO BE UNIVERSITY)

DIRECTORATE OF RESEARCH & CONSULTANCY

Ph.D. COURSE WORK ENROLLMENT FORM FOR _____/_____(M/Y)

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 :

Course(s) registered in the current semester

Sl. No.	Course Code	Title of the Course	Credit	Regular / Direct Study/NPTEL	Name of the Faculty	Signature of Faculty in-charge

Course(s) Already Completed

Sl. No.	Course code	Title of the Course	Credit	Grade	Month and year of passing

Signature of Scholar with date
Name:

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 :

Note:

1. **Copy of the approved Syllabus duly signed by the Doctoral Committee members should be attached with this form for all the courses registered for the current semester.**