Details of fee remitted

Chalan No. : & Date : Rs. Paid at :

(Form - V)

APPLICATION FORM FOR CHANGE OF TITLE OF THESIS

1.	Name	:				
2.	Address (with e-mail and phone number)	:				
3.	Registration Order No.	:				
4.	Name of Research Supervisor	:				
5.	Topic of the Research problem appro	ved:				
6.	Title to be modified to	:				
7.	Has such a change effected earlier	:				
8.	Reason for title change	:				
9.	Recommendation of the Research Suj	pervisor				
Certified and recommended that the change suggested by the research scholar is reasonable and it does not make any conceptual/directional changes to the research problem already assigned to the scholar and approved by the University						
			Signature:			
			Name :			
10. Recommendation of the Head/Place of Research						
Recommended for approval/ Not recommended for approval						
			Signature :			
			Name :			
(Seal)						
11	11. Declaration by the candidate					
	I do hereby declare that, I have confidently made this change with the permission					

of my Supervisor, as I strongly consider that this new title is more appropriate for the research topic which I have been carrying out and it will not make any rational changes

to the research topic assigned to me earlier.

Date:

Name:

Signature: