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 approved:

6. Title to be modified to :

7. Has such a change effected earlier :

8. Reason for title change :

9. Recommendation of the Research Supervisor
   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. 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 :
    Signature:
    Name :