

Institutional Research Assistance for P.G. Students

1. Name of the Applicant:
2. Department:
3. Name of the Supervisor:
4. Area of Research:
5. Date of Birth:
6. Contact Details:
 - 6.1. Complete Address for Correspondence:
 - 6.2. Email ID :
 - 6.3. Telephone No./ Mobile :
7. Educational Qualifications:
(In chronological order from SSLC onwards).

Sl. No.	Exams Passed	University / Institution	Year of Passing	Subjects	Specialization	Div./ % of Marks

8. Details of earlier training/ internship (if any).
9. Details of the Project Proposal:
 - 9.1. Title of the proposed project work:
 - 9.2. Objective:
 - 9.3 Work Plan:
 - 9.4. Expected Outcome:
 - 9.5. Journal References:
10. Any other relevant information:

DECLARATION

I, _____ hereby declare that the above given information are true to the best of my knowledge. I further declare that the money will be utilized for completing my P.G. project and present the project report to the college.

Signature of the P.G. Student

CERTIFICATE

This is to certify that Mr./Miss. _____ is doing P.G. project under my supervision in the department of _____ and it is also certified that two copies of utilization certificate and final report will be sent to the college after completion of the project.

Signature of the Guide