

**UNIVERSITY OF CALICUT
DIRECTORATE OF RESEARCH**

APPLICATION FORM FOR EXTENSION OF VALIDITY OF REGISTRATION FOR RESEARCH

1	Name & Address of Scholar			
	E-mail ID & Phone Number			
2	Research Centre			
3	Name & Designation of Supervisor			
	E-mail ID & Phone Number			
4	Name & Designation of Co-guide, if any			
	E-mail ID & Phone Number			
5	Registration Order No.& date			
6	Topic			
	Subject and Faculty			
7	Mode of registration(Full-time or Part-time)			
8	Whether availed extension benefit earlier?			
	If yes, Order No. & Date			
9	Whether successfully completed Course Work and PQE?			
10	Details of fee remitted			
	Receipt No	Date	Amount (in Rs)	Paid at

11. Declaration from Research Scholar:

I do hereby declare that, all the details provided above by me are true and correct to the best of my knowledge and belief, and that I will complete the research programme within the stipulated period as requested, if granted, and bestow all my efforts for the completion of the programme and submission of thesis along with all mandatory documents on time.

Date :

Signature

Name

12. Recommendation of Supervising Teacher:

I do hereby recommend that the extension of validity of research registration programme requested by the scholar, who is doing his/her research under my supervision, is genuine and admissible under the rules of the University

Signature:

Name& Designation:

13. Recommendation of Head of the Research Centre:

Date :

(office Seal)

Signature :

Name& Designation:

Mandatory documents to be attached:

1. Proof for remittance of required fee.
2. Copy of the registration order
3. Details of Course Work and PQE.
4. Copies of the orders of extension / FIP extension granted by UGC /change in guide/mode /topic if any already availed.
5. Specific recommendation of the Doctoral Committee for extension with solid reason(s).