

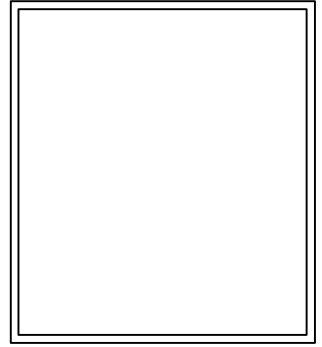


University of Engineering and Management, Jaipur

(Established by Act of State Govt. & u/s 22 of UGC Act, Ministry of HRD, Govt. of India)

SEMESTER REGISTRATION FORM

(_____ to _____)



Course: Ph.D. Programme

Department: _____

(IN BLOCK LETTERS)

1. Name of the Student: _____

2. Name of Parents

a) Father's Name: _____

b) Mother's Name: _____

3. Mobile No. : _____ Alternate Mobile No.: _____

4. Email ID: _____

5. (a) Name of the Supervisor: _____

(b) Name of the Co-supervisor and affiliation:

6. Candidature: Full-Time Part-Time (Internal) Part-Time (External)

7. Date of Registration: _____ / _____ / _____

8. Enrollment No. _____

9. Details of Fee Paid

(Amount of Rs _____ in favour of University of Engineering and Management,
Jaipur, payable at Jaipur)

DD /Cheque No. : _____ Date: _____

Name of Bank: _____

Signature of the
Student

Verified by the finance section
(Complete Payment/Partial Payment)

Signature of
Supervisor

Signature of
HOD

Signature of Ph.D.
Coordinator

*Note: Attach the Xerox copy of fees slip.