

Application Form for Ph.D. Course Work Examination, January-2026.

1. Name of the Research Scholar :
2. Permanent Registration Number :
3. Faculty :
4. Program/Department :
5. Male/Female :
6. Ph.D. Admission Year :
7. Name of Supervisor :
8. Category (Full time/Part time) :
9. Address for Communication with Contact No. :
10. Mail id :
11. Paper Details :

Paste recent
PassportSize
Photograph

Sr.No	Course Code	Course Name	Assessment Method (TH – EA, TH – IA)
1			
2			
3			
4			

Payment Details: -

Amount Paid _____ Transaction no./Receipt no. and Date: - _____

Declaration by the Ph.D. Scholar

I declare that all the above information given by me is true and authentic to the best of my knowledge and belief.

Signature of the Scholar

CERTIFICATE

This is to certify that Mr./Ms. _____ bearing PRN: _____ is a Ph.D. Scholar of the Sankalchand Patel University and he / she may be permitted to register for the Ph.D. Coursework examination. He / She shall satisfy the conditions of admission requirements and minimum attendance as prescribed by the University before appearing in the Ph.D. Coursework examination, failing which his/her examination form may be rejected.

Signature of Ph.D. Section Officer