शोध निदेशालय कोटा विश्वविद्यालय

एम.बी.एस. मार्ग, कोटा (राजस्थान)—३२४००५ फोन नम्बर : ०७४४—२४७१०३७



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Format-II

UNDERTAKING

(To be submitted by the Research Scholar)

The University of Kota, Kota has allocated to me to **Prof. / Dr. <Name, Designation, Address of Research Supervisor and Co-supervisor,** *if any*> as a research scholar for perusing Ph.D. under his/her/their supervision. I will start and perform my Ph.D. research work under the supervision of the research supervisor(s) in the partial fulfillment of the requirement for the award of the Ph.D. degree as per the UGC regulations and research ordinances of the University. I will be regular during the entire Ph.D. research work and will submit half yearly progress reports, Ph.D. thesis, *etc.* well in time. I will follow all the ethics and sincerity in the directions of my research supervisor(s).

Signature & Seal of the Research Co-supervisor, *if any*

Signature & Seal of the Research Supervisor