शोध निदेशालय कोटा विश्वविद्यालय

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



Directorate of ResearchUniversity of Kota

MBS Marg, KOTA (Rajasthan)-324005 Phone No.: 0744-2471037

Format-VI

Application for Cancellation of the Ph.D. Registration

(To be submitted by the Research Scholar)

To
The Director
Directorate of Research
University of Kota
Kota (Rajasthan)-324005

Subject: Application for Cancellation of the Ph.D. Registration.

Dear Sir / Madam,

In reference to above cited subject, I am unable to continue my Ph.D. research work due the reason(s) as mentioned below. Therefore, you are requested to kindly cancel my Ph.D. registration. The details are given below:

1.	Name and Address of the Research Scholar Mobile Number& E-mail ID	:
2.	Date of Joining at Research Center / Department	:
3.	Ph.D. Registration Number and Date	:
4.	Name of the Subject	:
5.	Name of the Faculty (Arts / Commerce & Management / Education / Law / Science / Social	: Faculty of
6.	Name & Designation of the Research Supervisor(s) Mobile Number& E-mail ID	:
7.	Name of the Research Centre / Department	:

9.	Dates of Submission of Half Yearly Progress Reports:				
	(V)		(VI) (V	II) (IV)	
10.	Reaso	on(s) for cancella	tion of Ph.D. Registrati	on :	
11.		se attach origina Amount of the Mode of Paym	I slip of the fee deposite Fee ent (DD/Challan/Onlin te of DD/Challan/Onlin	: e Trans.):	
Date	:			Signature of the Research Scholar	
		Recomme	ndations / NOC by the	Research Supervisor(s)	
Date	:				
Signature & Seal		_		Signature & Seal of the	
	Re	esearch Co-super	Visor, if any	Research Supervisor	
			tion of the Ph.D. registr	ration of Mr. / Ms. Mrss) is forwarded.	
Date	:	Signature & Seal of the Principal / Director / Head			