

ANNA UNIVERSITY TIRUCHIRAPPALLI  
Tiruchirappalli-620 024  
Centre for Research Ph.D./  
M.S. (By Research) PROGRAMME

**ENROLLMENT FORM/ REGISTRATION RENEWAL FORM**

July 2009

- (i) Name in Block Letters :
- (ii) Registration No :
- (iii) Month & Year of admission : July 2009
- (iv) Date of joining :
- (v) Faculty :
- (vi) Supervisor's Name :
- (vii) Academic Category : Full Time / Part Time
- (viii) Number of Course work completed :
- (ix) No. of Course Work registered in this semester :
- (x) Date of Confirmation :
- (xi) Date of Payment of fee for Present semester :
- (xii) Fee Receipt for the current semester :  
DD.No ..... Date: .....  
Amount: ..... Bank: .....

**DECLARATION**

I ..... doing the Ph.D. / M.S. (By Research) Programme

1. As a full time scholar I state that I am not employed any where\*/ I have submitted NOC form my employer\*
2. As a Part time scholar I am working as ..... at .....
3. As a part time scholar working in project staff, I state that I am still employed in the project and the copy of appointment order is enclosed
4. As a part time faculty member, I am still working in the same institution as mentioned in my application form\* / the change of working place has been intimated to the office of the Director (Research)\*

(\* Strike off whichever is not applicable)

Date:

Place:

Signature of the Research Scholar

Signature of the Supervisor with seal