

Annexure –II

BIRLA INSTITUTE OF TECHNOLOGY, MESRA, RANCHI
SEMESTER RENEWAL OF REGISTRATION
(Ph.D/M.Phil)

1.	NAME OF CANDIDATE (IN CAPITAL LETTERS)		
2.	Roll No		Date of Registration: (During Admission Time)
3.	Address For	Correspondence	Permanent
4	Contact Mobile No		
5	Email Address		
6.	Department		
7.	Full Time /Part Time		
8.	Funding (SF/IRF/Project & other)		
9.	Category (GEN/OBC/SC/ST)		
10.	Gender (Male/Female)		
11	Marital Status (Married/Unmarried)		
12.	Name of the Ph.D Internal Guide(s)		
13	Name of the Ph.D Co-Guide		
14	Name of the Ph.D External Guide		
15.	Title of Ph.D Thesis		
16.	Course work – Theory (Completed)	Yes /No	(Grade Card Result Date Mention) :
	Course work – Term Paper (Completed)	Yes /No	(Presentation Date Mention) :
17.	Synopsis (Completed)	Yes /No	(Presentation Date Mention) :
18.	Publication Details (3) (As per Criteria)		
19.	Last Annual Presentation Date		
20.	Renewal of Registration Requested for the Year/Semester	Year:	Semester:
21.	Details of Regs. Fees Deposited in the Preceding Year/ Semester	Year: Semester:	Receipt No & Date of Payment

Signature of Candidate

Date:

Supervisor/Guide/Co-Guide

Date:

Chairman of Doctoral Committee

Date:

(FOR OFFICE USE ONLY)

22.	Details of Dues	(a) Institute Dues upto: (June/Dec.) year
		(b) Hostel /RS Hostel/ Mess Dues :
23.	Payment Details for Current Session ²	

1. Renewal of Registration can be one Semester wise or for one complete year whichever is convenient to the candidate.

2. Payment can be made either by Credit/Debit Card or DD or cash.

3. Criteria Paper shall have Candidate/Guide/Co-Guide & External Guide as Authors

Remarks from Dean (PGS) Office

Dean (PGS)

BIRLA INSTITUTE OF TECHNOLOGY, MESRA, RANCHI

REGISTRATION CARD : Pre Phd

Semester Mo/Sp _____ (Full Time/ Part Time)

EXAMINATION

NAME _____ ROLL NO. _____ BRANCH _____
 (in block letters)

Course No	Theory Courses	Credit	Course No	Specialization	
				Term Paper / Sessional	Courses

Total Credit _____

I undertake that all the entries made above are correct to the best of my knowledge. I shall be fully responsible, if I am not able to attend classes of any subject and fall short of attendance in such subjects.

AR (Academic Programmes)

H.O.D. / Adviser

(Signature of the Student with date)

SEMESTER PROGRAMME

NAME _____ ROLLNO. _____ SC/ST/OBC/EBC/F/NRI _____ BRANCH _____

SEMESTER _____ Mo/SP _____ MALE/FEMALE _____ ROOM NO. _____ HOSTEL NO. _____

Total No.of Credit Registered so far _____

Total No.of Credit Cleared so far _____

ADDRESS FOR COMMUNICATION :

TELEPHONE NO. _____

S/O / D/O _____

_____ PIN CODE _____

Course No	Theory Courses	Credit	Course No	Term Paper / Sessional	Courses	Credit

INSTITUTE DUES

MESS DUES

(Signature of the student with date)

**BIRLA INSTITUTE OF TECHNOLOGY
MESRA, RANCHI**

DEPARTMENTAL COPY

MO/SP : _____ Course : _____ Semester Registered _____ Date _____

NAME _____ ROLL NO. _____ BRANCH _____

Address For Communication : _____

PIN No _____, Telephone No. _____ Hostel No. _____ Room No. _____

Course No	Theory Courses	Credit	Course No	Term Paper / Sessional Courses	Credit

Signature of the Student with date

**BIRLA INSTITUTE OF TECHNOLOGY
MESRA, RANCHI**

STUDENT COPY

TO BE KEPT IN SAFE CUSTODY THROUGHOUT THE SEMESTERS

MO/SP : _____ Course : _____ Semester Registered _____ Date _____

NAME _____ ROLL NO. _____ BRANCH _____

Certified that the above mentioned student has registered for the following Courses(s). In each course a minimum of 75 percent attendance is mandatory.

Course No	Theory Courses	Credit	Course No	Term Paper / Sessional Courses	Credit

AR (Academic Programmes)