Form No

Abbreviated name of the College To be entered by the College Office Department)

Punya	shlok Ahily
यादेवी होळकर	Ph.I
ग्यापीठ पन्नता ।। (CGPA 2.62)	
redited-2015	

unyashlok Ahilyadevi Holkar Solapur University, Sola	pur
Ph.D. Course Work Examination Form	



Grad NAAC Ac

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The Director	
Board of Examinations & Evaluation,	
Punyashlok Ahilyadevi Holkar Solapur University, Solapu	ur

Sir,

I request Your kind permission to present myself at the ensuing Examination for the Ph.D.

Course Work in the subject ______at the Centre _____

I. EXAMINATION PARTICULARS

I offer to be examined in the following paper /s:-

	Paper – <u>I</u>	
	Paper – II	
	(Give the detail titles of Paper – I,	
		with Seat Noin April/Dec
		Yours faithfully,
	Place : Date :	Signature of the candidate
	II. PER	SONAL PARTICULARS
1)	Name in full (CAPITAL LETTERS) (as per Degree Certificate)	:
2)	Also in Devanagari Script	:
3)	Student Contact No. & Email	:
4)	Male or Female	:
5)	College of Institution Research Centre/Place where the candidate ha kept terms for the Examination	s :
6)	Date of obtaining the M.A./M.Com/M.Sc./M.Ed. Degree	:

7)	Month & Year of Registration as Ph.D. student of this University	:	
8)	Permanent Residential Address	:	
9)	Name of the Guide with Mobile No.	:	
	& Email ID	:	
10)	Parent's/Guardian's Annual Income Rs.	:	

11) Last appearance (if any)

Exam.	Seat No.	Year	Centre

III.CERTIFICATE TO BE SIGNED BY THE GUIDE OR HEAD OF THE DEPARTMENT

I certify that Shri/Smt.

has taken instruction for the Theory portion from me as a regular/external, student and the title

of the Paper - IV as mentioned overleaf is correct

Signature of Guide or Head of the Department/Principal

CERTIFICATE

This is to certify that The Ph.D. Course work was conducted at the research centre as per University Syllabus and the candidate has completed its all requirements.

Place :

Date :

Stamp

Head of Research Centre

Note :

"The Examination programme is subject to change. If there is any change in the programme of the examination, the University is not responsible for the loss or inconvenience caused to the candidate".

Punyashlok Ahilyadevi Holkar Solapur University, Solapur



Ph.D. Course Work Examination Form Hall Ticket



Candidate Resent Passport Size Photo dully attested

1 Name (In Block Letters)	:
2 Name of the Examination	:
3 Center of the Examination	:
4 Name of the Papers	:
	1
	2
	3
	4

Signature of the Candidate

Signature of Head of the Department/Principal