

राष्ट्रीय प्रौद्योगिकी संस्थान अगरतला

NATIONAL INSTITUTE OF TECHNOLOGY AGARTALA

REGISTRATION OF Ph. D. PROGRAMME

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	ecommendation DOC ered for the Doctor o					elow is provi	sionally
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Name of the Scholar		Enrolment No	Enrolment No. Cate		D	ate of Enrollment	
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Date of completion of comprehensive examination:							
Research Problem:							
To Name of Scholar, Ph. D scholar, Dept., of ()						Dean (academic)	
Copy 1.	to, Chairman Senate						

2. Chairman DPPC (for kind information to all DC members)