

M.Phil. / Ph.D. - FULL-TIME / PART-TIME BHARATHIAR UNIVERSITY :: COIMBATORE - 641 046

M.PHIL./Ph.D. DEGREE (Part - I) EXAMINATIONS: JANUARY-2025 (Kindly read the instructions given overleaf before filling the application form)

1. NAME (IN CAPITAL LETTERS)	
(as in the previous Degree Certificate)	
2. REGISTER NUMBER	
(Fresh Candidates need not fill it up)	
3. College/Institution where the candidate is registered	
4. Department	
5. Programme Registered for M.Phil./Ph.D. FT/PT	
6. Year and session in which the candidate was	
Registered for M.Phil. / Date, Month and Year for Ph.D.	
7. Date of Registration / Re-Registration and the date and Number of the University communication registering/ Re-registering the candidate for the Course. (Photo copy of this communication should be enclosed).	
8. Students Address (Mobile No. & email address)	
Mobile No:	
9. Name and designation of the Supervisor with Official Address with Mobile Number and email address	
10. Residential Address of the Supervisor for	
Correspondence	
11. Whether the Supervisor has been recognized by the	Yes / No
University.	
If Yes, the No. & Date of the Communication.	
12. Change of Supervisor, if any: Furnish date and number of the University communication permitting guide change. Give name and designation of the previous supervisor.	
13. SUBJECTS in which the candidate is appearing for in	No. of appearance
the ensuing Examination <u>Title - as per Syllabus</u> Paper I:	(First/Second/Third/Fourth)
Paper II :	
Paper III:	
14. Fees: Through online payment necessary receipt should Challan No. & Date Name of the Ba	
14. Place :	
Date:	Signature of the Candidate
15. Signature with seal of the	
Supervisor with Designation Head of the Depart	ment Head of the Institution

M.Phil. / Ph.D.

FULL-TIME / PART-TIME

BHARATHIAR UNIVERSITY, COIMBATORE – 641 046. M.PHIL./Ph.D. DEGREE (Part – I) EXAMINATIONS : JAN- 2025

HALL TICKET

Examination Centre:					
Register Number:				Affix Photograph to be attested by the Head of University Department / Principal of College	
Name of the Candidate :(in Capital Letters)					
Department and Institution in which the Candidate has been registered		1 Timespan of Conlege			
Appearing for paper(s) Fill in the titles of the paper (s) appearing for		Papers	Title as	Title as per syllabus	
	I				
	II				
		III			
Controller of Examinations		Signature of the Candidate			

INSTRUCTIONS TO CANDIDATES

Note: Candidates should write their REGISTER NUMBER only in the space provided in the first page of the answer book. They are prohibited from writing their names on any part of their Answer Books.