

**BHARATHIAR UNIVERSITY : COIMBATORE 641 046**

**PROFOMA FOR EXTENSION OF TIME FOR  
SUBMISSION OF Ph.D. THESIS**

Details of amount remitted:

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1. Name of the Candidate :
2. Address with **Mobile number** :
3. Subject / Discipline in which registered  
For Ph.D. :
4. Full-time / Part-time :
5. Broad Field of Research :
6. Date of registration for Ph.D. programme :
7. Office Communication No. & Date :  
(Enclose Xerox copy)
8. Date of expiry of maximum period :
9. University / College / Recognised  
Institute where the research work is  
Being undertaken :
10. Name, Designation & address of the guide :
11. Specific reasons for not completing the  
Research work within the normal period :
12. Details of extensions already obtained: Extn. No : From : To :  
(if any)
13. Period of extension of time required : Extn. No : From : To :
- \*\*14. Whether the candidate has paid tuition and  
Other fees dues to the University till date Last fee paid date :  
For the period: From : To :  
Finance Section cash receipt number:
15. Signature of the Candidate :
16. Specific recommendations of the guide :
17. Signature of the Guide :
18. Signature of the Head of the University  
Dept/Principal of the College/Director of  
Research Institution (with seal) :

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**\*Note : 1. Extension fees should be paid through on-line mode only**

**2. Enclosures to be attached - Registration copy, Previous extension copy, Guide change copy (if any)**

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|-------|------------------------|------|------------------------|
| @ I   | Extension – Rs. 1000/- | @ II | Extension – Rs. 2000/- |
| @ III | Extension – Rs. 4000/- | @ IV | Extension – Rs. 5000/- |

@ Penalty Rs. 500/- for each Extension ( Applicable to the Scholar who had completed the Extension period )

\*\* : Applicable only to candidates admitted in the University Departments.