

Motherhood University, Roorkee.

Extension Form for Ph.D. Course

I.....is the Research Scholar of batch.....in the Faculty..... with.....stream under the supervision of

I.....Registration No.....has

Completed three years as Research Scholar. As per the MHU Research Ordinance (If Research Scholar not completed the Research work within three years, he/she required to seek extension of six months), I need to take extension for continue the Research work. I request you to extend my Research time for six month which will be applicable fromto.....

I attach the Extension Fee Receipt Rs:/- along herewith.

Applicant Signature

Forwarded By:

Supervisor

DRCC Chairman

Verified by:

Assistant Director Research

(Prof. Seema Tandon)
Dy. DIRECTOR RESEARCH
MOTHERHOOD UNIVERSITY
ROORKEE

Countersigned By:

Director Research

(Signature)
Prof. P.K. AGARWAL
DIRECTOR RESEARCH
MOTHERHOOD UNIVERSITY
ROORKEE (HARIDWAR)

Approved by:

Hon'ble Vice Chancellor