

# RAFFLES UNIVERSITY, NEEMRANA (ALWAR)

(Application for change of supervisor/ Co Supervisor)

(To be filled by the student)

1. Name of Research Scholar:.....
2. Enrollment No.....
3. School.....
4. Date of Registration .....
5. Topic of Thesis.....  
.....  
.....
6. Name of Present Supervisor.....
7. Reason for Change of Supervisor / Addition of Co-Supervisor .....
- .....
- .....
- .....
- .....

I am requesting to replace the current supervisor/co-supervisor for the reason/s stated above. I take responsibility for any problem (including personal), which may affect the progress, quality and completion of my study, if that should occur as a result of this request.

Signature of Research Scholar  
Date

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**No Objection Certificate from the earlier Ph. D. Guide for the Change of Guide**

I, Dr. \_\_\_\_\_ Designation \_\_\_\_\_

hereby state that, I have no objection for change of guide in respect of (Ph. D. student)

\_\_\_\_\_ who is

prosecuting Ph. D. research work under my guidance.

Date :

Signature  
Designation

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Particular of Proposed supervisor (s) by Dean/ Principal / HOD of the School.

Name & Designation	Department / Centre and Organization	No of Students supervising excluding this student	Signature of Supervisor

Dean/ Principal /HOD

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**Consent of the New Guide/Research Head of the Research Institute**

I, Dr. \_\_\_\_\_ Designation \_\_\_\_\_

hereby state that, I have submitted willingness in respect of (Ph. D. student) \_\_\_\_\_

\_\_\_\_\_ prosecuting Ph. D. research work under another guide

who has submitted No Objection Certificate (NOC) for the change of guide. Ph. D. Scholar

Date:

Signature  
Designation

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**Office of Director Research**

Recommended & forwarded for approval / NOT Recommended.

Director Research

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**Approval from President**

APPROVED / NOT APPROVED.

PRESIDENT