

Annexure I

Faculty of Management

Savitribai Phule Pune University

PhD COURSE WORK PART I , 2016–REGISTRATION FORM

Latest Colour
Photograph

Name of the Research Student: _____

Residential Address: _____

Gender: _____ Mobile No: _____ Email: _____ @ _____

Subject (Specialization): _____

Approved Title(If Applicable):

Date of Registration: _____

Research Centre: _____ Place of Research : _____

Name of the Guide: _____

Signature of the Research Student

Forwarded through:

Head of the Research Centre where the candidate is registered for PhD.

Signature & Seal of PGRC Head

Enclosures:

1. Photocopy of the Admission Letter/Allotment Letter for PhD
2. One Colour Photograph