



GTU/Ph.D./Extension/20 /

Date:

Application for Extension for Submission of Synopsis/Thesis/Registration

1. Name of Research Scholar:
2. Enrollment No.:
3. Faculty/Discipline:
4. Mobile No.:
5. Registered email ID:
6. Specify the registration category: Full Time / Part Time
7. Research Title as mentioned in the Final Registration Form: (Enclose copy of Final Registration Certificate)
8. Name of Supervisor (with Designation):
9. Name of DPC Member 1 (with Designation):
10. Name of DPC Member 2 (with Designation):
11. Name of Co-Supervisor (with Designation, if any):
12. No. of DPCs completed till date:
13. No. of Research Week reviews completed till date:
14. Date of Open Seminar: <dd/mm/yyyy>
15. Due Date for submission of Synopsis / Thesis: <dd/mm/yyyy>
16. Any previous extension granted (Yes / No):
If 'Yes', extension is granted till:<dd/mm/yyyy>
17. Extension for Submission of Synopsis / Thesis Required Till:
<dd/mm/yyyy>



18. Reason/Justification:

19. Enclosures (if any)

20. Declaration:

I hereby understand that above details are true to the best of my knowledge and submitting an application will not entitle any permission for seeking extension.

Place:

Date:

(Signature of the Research Scholar)

Recommendation of the Supervisor:

Place:

Date:

(Signature of the Research Supervisor)



GUJARAT TECHNOLOGICAL UNIVERSITY

(Established by Government of Gujarat under Gujarat Act No. : 20 of 2007)

ગુજરાત ટેકનોલોજીકલ યુનિવર્સિટી

(ગુજરાત સરકારના ગુજરાત અધિનિયમ ક્રમાંક : ૨૦/૨૦૦૭ દ્વારા સ્થાપિત)

FOR OFFICE PURPOSE ONLY

Recommendation of the respective DRC/DRCs

Remarks of the Section (if any)

Dealing Person

I/c Section

Registrar