

**BOARD OF RESEARCH STUDIES
(FACULTY OF)
UNIVERSITY OF DELHI**

SPECIAL EXTENSION APPLICATION FOR Ph.D. PROGRAMME

DEPARTMENT OF

(Vide E.C. Resolution No. 19, Dated 10.10.2020/21.10.2020)

The Chairman,
Board of Research Studies,
Faculty of,
University of Delhi.

Sir/Madam,

I wish to hereby apply for special extension of span period for the Ph.D. Programme of the University of Delhi in the Faculty of

I undertake that I shall submit my Ph.D. thesis within this special period of extension as notified by the BRS.

Sincerely yours

Name of the Candidate

Signature of the Candidate

1. Department:
2. University Enrol. No:.....
3. Name of Supervisor:..... 4. Name of Co-Supervisor (if any):
5. Present Address:.....
6. Date of Birth:
7. Name of Father or Guardian:
8. Name, Address (along with Tel. No. and E-mail id) of Father/
Guardian:.....
.....
9. Category (General/SC/ST/OBC):
10. Date of Registration in the Ph.D. Programme:.....
11. Status of the Ph.D. thesis:
.....
.....
.....
.....
12. Ph.D. course work completed/not completed/exempted:

I certify that the statements made above are true to the best of my knowledge and belief.

Signature of the Candidate Signature of the Supervisor Signature of Co-Supervisor (if any)

*Signature of the Head of the Department
(with Seal)*