



St. PETER'S UNIVERSITY

St. Peter's Institute of Higher Education and Research
(Declared under section 3 of the UGC Act 1956)

Avadi, Chennai – 600 054. Tamil Nadu.

Phone: 26558090 Fax. 044-26558087

Email: research@stpetersuniversity.org

Website: www.stpetersuniversity.org

APPLICATION FOR COURSE WORK FOR RESEARCH SCHOLARS

1. Name & Address of the Candidate :
2. Reg. No. :
3. Email Id :
4. Programme :
5. Department/Division/Institute/
in which the Candidate is doing research :
6. Full time / Internal / External
(whichever is applicable) :
7. Date of Birth :
8. Courses being studied

Affix Passport Size
Photo

Sl.No.	Course Name	Date of Examination	Signature of the Course Co-ordinator

(ENCLOSE PHOTO COPY MINUTES OF THE FIRST DOCTORAL COMMITTEE)

8. Examination fees to (Rs.1000 per subject) :

Challan No. :

Bank :

Date :

(Enclose copy of Challan)

Date:

Signature of Research Scholar

Recommended and Forwarded

Signature of the Supervisor with seal

Approved