



NOORUL ISLAM CENTRE FOR HIGHER EDUCATION

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Kumaracoil - 629180, Kanyakumari Dist., Tamilnadu

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NICHE\R&D\02 09 00\2015

Date:

FORM FOR TITLE CHANGE

1. Name of the scholar :
2. Register No. :
3. Department :
4. Year of Registration :
5. Category :
6. Existing Broad Area of Research :
7. Existing Research Title :
8. Coursework details :

Sl. No.	Name of the Paper	Mark
1.		
2.		
3.		
4.		

9. Whether comprehensive viva is Completed (*if yes, give the date*) : Yes / No
10. Proposed Broad Area of Research :
11. Proposed Research Title :
12. Whether the Scholar needs to do any additional coursework paper relevant to new proposed Research Area / Title: Yes / No (*if yes, give details in separate sheet*)
13. Date of Fee Payment (Rs.1,000/-) : (*enclosed the xerox copy*)

Signature of the Scholar

Chairman

External Expert

Internal Member

Supervisor