



BOARD OF RESEARCH, DEVELOPMENT & CONSULTANCY (BRDC)

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NICHE\R&D\02 11 00\2024

Date:

TITLE CHANGE FORM

1. Name of the Scholar :
2. Registration Number :
3. Department :
4. Faculty :
5. Year of Registration :
6. Category : FT/PT (Internal/External)
7. Existing Broad Area of Research :
8. Existing Research Title :
9. Coursework Details :

Sl. No.	Name of the Coursework Paper	Mark
1.		
2.		
3.		
4.		
5.		

10. Whether Comprehensive Viva is Completed (If Yes, Give the Date) : Yes / No
11. Proposed Broad Area of Research :
12. Proposed Research Title :
13. 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)
14. Approval of Doctoral Committee Members for Change of Course Work (If Yes, Attached Photo Copy of Sheets) :
15. Fee Payment Details :
(Enclosed the Evidences)

Payment Details	In the Name of	Noorul Islam R&D
	Account No & IFSC Code:	026100050307516 & TMBL0000026
	Bank Name	Tamilnad Mercantile Bank Ltd, Thalakkulam
	Amount Paid & Date of Payment	Rs. 1,000/- (Rupees One Thousand Only)
	Transaction ID	

Signature of the Scholar

Signature of the Supervisor

(For Office Use Only) Checked and Accepted

Verifying

Director - Research