



Application for permission to deposit Fee to the Second/Third/Fourth year

1. Name of the Candidate -----
2. Father's Name -----
3. Subject ----- 4. Enrolment Number -----
5. Date of Registration -----
6. Topic of Research-----
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7. Details of Progress Reports submitted so far

Report	Duration of work	Date of submission
First		
Second		
Third		

8. Detail of Fee Deposited so far

Year	Amount	Date of Deposit	Receipt No.

9. Name & Signature of the **Supervisor** with Remark -----

10. Name & Signature of the **Director** of the Concerned School with Remark -----

On the basis of the recommendations of the Supervisor and the director the Fee of the above mentioned research scholar for the second/Third/Fourth year may be deposited. Please return this form after entering the detail of the deposited fee to the R&D cell.

Director, R&D Cell

Details of the Fee Deposited; (Bank Draft Detail or cash receipt No)

Date:

Amount:

Received by