

**INDIRA GANDHI NATIONAL OPEN UNIVERSITY**

**MINOR / MAJOR CHANGE IN THE TITLE OF THE PHD THESIS**

<b>School</b>	<b>Discipline</b>	<b>Name of the Student, Enrolment Number and Programme</b>	<b>Name of the Supervisor</b>	<b>Existing title</b>	<b>Changed title</b>	<b>Reason for change in Title</b>	<b>Details of DRC Recommendation</b>	<b>Details of SB/SCSB Recommendation</b>

Signature and Name of the Research Programme Coordinator:

Signature & Stamp of the Director of the School:

**INDIRA GANDHI NATIONAL OPEN UNIVERSITY**

**CHANGE OF SUPERVISOR**

<b>Name of the School</b>	<b>Discipline</b>	<b>Name of the Student, Enrolment Number and Programme</b>	<b>Research Topic</b>	<b>Existing Supervisor</b>	<b>Reason for change</b>	<b>Changed Supervisor</b>	<b>Details of DRC Recommendation</b>	<b>Details of SB/SCSB Recommendation</b>

Signature and Name of the Research Programme Coordinator:

Signature & Stamp of the Director of the School:

**INDIRA GANDHI NATIONAL OPEN UNIVERSITY**

**CANCELLATION OF REGISTRATION**

<b>School</b>	<b>Discipline</b>	<b>Name of the Candidate and Enrolment Number and Programme</b>	<b>Research Title and Name of the Supervisor</b>	<b>Reason for cancellation</b>	<b>Whether the candidate has been communicated regarding recommendations of DRC / SB about cancellation (Mention Mode of Communication also (through email or registered post)</b>	<b>Details of DRC and SB / SCSB Recommendations</b>

Signature and Name of the Research Programme Coordinator:

Signature & Stamp of the Director of the School:

**INDIRA GANDHI NATIONAL OPEN UNIVERSITY**

**APPROVAL OF RESEARCH TOPIC AND SUPERVISOR BY RC/RCSC**

**Name of the School:**

**Name of the Discipline:**

**Programme : PhD**

<b>Sl no</b>	<b>Name of the Student and Enrolment Number</b>	<b>Topic of Research</b>	<b>Research Supervisor(s) (In case of Joint Supervisor, both names are to be given)</b>	<b>Number of students currently registered with the Supervisor excluding the present student</b>	<b>Course completion status (Specify whether completed/ not completed)</b>	<b>Date of DRC approval (Pl. enclose Minutes of the meeting)</b>	<b>Date of School Board/ Standing Committee of School Board approval (Pl. enclose Minutes of the meeting)</b>
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)

Signature and Name of the Research Programme Coordinator:

Signature & Stamp of the Director of the School:

**INDIRA GANDHI NATIONAL OPEN UNIVERSITY**  
Maidan Garhi, New Delhi

**Approval for faculty member as Research Supervisor**

**Name of the School:**

**Name of the Discipline:**

S. No.	Name of the Faculty Member with Designation	Whether holding Ph.D. Degree (Please say Yes/No)	No. of Research Publications	Please provide the details publications in the refereed Journals (at least 5 in case of Professors / Associate Professors: and at least 3 in case of Assistant Professors)	
				Title of the Research Publication	Name of the Journal, Vol. No. Issue No. and Year

**Name and Signature of the Research Programme Coordinator:**

**Signature and stamp of the Director of the School:**

**INDIRA GANDHI NATIONAL OPEN UNIVERSITY**

**WITHDRAWAL OF REGISTRATION OF MPHIL /PH.D STUDENTS**

**School :**

**Discipline :**

<b>Name of the Candidate and Enrolment Number and Programme</b>	<b>Name of the supervisor</b>	<b>Title of the thesis if allotted</b>	<b>Reason for Withdrawal of Registration</b>	<b>Details of DRC Recommendation</b>	<b>Details of SB/SCSB Recommendation</b>

**Name and Signature of the Research Programme Coordinator:**

**Signature and stamp of the Director of the School:**

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**Approval for Co-supervisor**

<b>Name of the School</b>	<b>Discipline</b>	<b>Name of the Student, Enrolment Number and Programme</b>	<b>Research Topic</b>	<b>Existing Supervisor</b>	<b>Name of the Co-supervisor</b>	<b>Details of DRC Recommendation (enclose CV of the co-supervisor)</b>	<b>Details of SB/SCSB Recommendation</b>

Signature and Name of the Research Programme Coordinator:

Signature & Stamp of the Director of the School: