

**Assam Rajiv Gandhi University of Cooperative Management**

(A Govt. of Assam University)

Recognised by UGC and member of Association of Indian Universities

Basic Tinali, Gadadhar Nagar, Joysagar, Sivasagar

Email: info.argucom@gmail.com

***Course Work Registration Form - Ph.D.***

Name of the Research Scholar :

(in Block letters)

Registration Number :

Mode of Admission

(Tick Appropriate box)

: Full Time

 Part Time

Department :

|  |  |  |  |
| --- | --- | --- | --- |
| ***S.******No*** | ***Course Code*** | ***Course Name*** | ***Course Credit*** |
| ***L*** | ***T*** | ***P*** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Payment Details | : | Amount of fees paid | Receipt No. | Date of Payment |
|  |  | ` |  |  |

|  |  |
| --- | --- |
| **Date:** | **Signature of the Research Scholar** |
| ***Research Supervisor*** | ***Head of the Department*** |
| **Remarks:****Dean (Academic)** |
| **Approved / Not Approved** |  |
|  | **Controller of Examinations** |

Encl: Photocopies of

1. Provisional selection letter issued by the Registrar
2. Syllabus for course work