



যাদবপুর বিশ্ববিদ্যালয়

JADAVPUR UNIVERSITY

KOLKATA – 700 032

FORM FOR COURSE REGISTRATION FOR PH.D SCHOLARS  
(UNDER F.E.T./F. SC./ F.A./FISLM)

DEPARTMENT/SCHOOL/INSTITUTION \_\_\_\_\_

(in which registered for Ph.D.)

(ENROLMENT FOR SEMESTER: JULY/DECEMBER, JANUARY/JUNE)

1. Name in full (in Block letter) : \_\_\_\_\_

2. Gender (Male/Female/Other): \_\_\_\_\_

3. Address for Communication: \_\_\_\_\_

4. Phone No. \_\_\_\_\_ Mobile No. \_\_\_\_\_

5. Course Taken:

Sl. No. Name of Subject/course Subject Code Dept./School/Institution under which subject offered

1.

2.

3.

4.

Date: \_\_\_\_\_

Signature of the student in full

**Head of the Department/Director of School/Supervisor(s)**

**Signature of the Dean, Faculty of** \_\_\_\_\_

Registration No. \_\_\_\_\_ of \_\_\_\_\_

Date of registration \_\_\_\_\_

Superintendent, PhD Cell, Faculty of \_\_\_\_\_