Ph.D. SYNOPSIS SUBMISSION FORM

Name & Place of Bank	Application Fee: Rs.100/- Synopsis Submission Fee: Rs.
Amount	For Full-time/Part-time candidates
Thesis Submission Fee: Rs.	
	Passport
Date of Payment	Size
தமிழ்நாடு திறந்தநிலைப் பல்கலைக்கழகம் TAMILNADU OPEN UNIVERSITY [Established by Act No. 27/2002 of the Government of Tamil Nadu] No. 577, Anna Salai, Saldapet, Chennal - 600 015.	photo

1.			In Englis	
	Name of the Candidate			
			In Tamil	:
2.	Sex		Male	Female
	JUL 1		1,1410	1 chillic
3.	Age and Date of Birth			
4.			In Englis	h:
	Name of Father or Guardian			
			In Tamil	:
5.	Nationality	Religion		Community: SC/ST MBC BC OC
6.				
	Address with Phone Numbers (in b to which communications should b			
			Mobile:	Landline
7.	Register number, month and year of passing the PG / M.Phil. Degree Examination and name of the institution			
8.	Date, Month and Year of the convocation at which the degree was taken			
9.	The Month and Year in which the oprovisionally registered for the Phand quote the number and date of communication registering for the	.D. Degree this office		

10.	The Number and date of this office communication confirming the provisional	
	Registration for the Ph.D. Degree	
11.	Enrolment No. & Mode (Part-time or Full-time)	
12.	Subject	
13.	Title of the Thesis (in block letters)	
14.	Name of the School in which the candidate is working for Ph.D. Degree and the name of the supervisor who supervises and directs his/her Research work.	School: Supervisor:
15.	Signature of the Candidate	
16.	Signature of the Supervisor with Designation and Seal	Mobile: E.Mail: Landline
17.	Signature of the Co-Guide with Seal (if applicable)	

18.	Signature of the Head of the Department with Seal where the candidate is working for the Ph.D. Degree	
19.	Signature of the Director of Research with date and Seal	
20.	Signature of the Head of the Institution /Registrar/ Director with date and Seal	
21.	Date: Station:	