



PEC UNIVERSITY OF TECHNOLOGY

CHANDIGARH

REQUEST BY STUDENT FOR STATE OF ART SEMINAR EXAMINATION

CHAIRMAN, DRC

Name of Research Scholar _____

Department _____

Synopsis Title: “ _____ ”

Through : SUPERVISOR(s)

I have earned the required number of credit(s) with minimum CGPA criteria 7.00 in the following Ph.D. course work.

Sr.no.	Course ID	Course Name	Semester/ Session	Credit(s) earned	Grade obtained

Note: Self attested photocopies of the grades sheets/ Course work certificate and synopsis are enclosed.

My date of initial registration is _____

It is requested that my State of Art seminar may kindly be arranged.

Date:

Signature of Candidate _____

Name of Scholar _____

Student ID _____

Forwarded by:

Recommended by:

Supervisor(s)

Chairman, SRC

Copy of Performa is sent to Dean Academic office for record.