

**RESEARCH AND DEVELOPMENT
GKM COLLEGE OF ENGINEERING AND
TECHNOLOGY
CHENNAI-600 063**

Ph.D	
Reg.No	

COURSE WORK REGISTRATION FORM

Duration:

I.DETAILS OF THE SCHOLAR

1. Name of the Scholar :

2. Registration No :

3. Address of the scholar with E-mail ID
and Mobile Number :

4. Department and College in which the scholar is doing research:

5. Category of registration : Full-Time/Part-Time

II. COURSE WORK REGISTERED IN THE CURRENT SEMESTER

Sl.No	Course code	Course Title	No. of Credits	Core Course/ Elective/ Special Elective	Signature, Name, Designation and Address of the Course Instructor
1					

Signature of the Head of the Department

Signature of the Scholar

Signature of the principal

Note: Submitted to R&D cell, GKM CET