

TEMPLATE OF THE PROFORMA FOR UPLOADING DATA REGARDING PH.D.SCHOLARS

Name and Address of the University : THE ICFAI UNIVERSITY, SIKKIM

Sl. No.	Faculty	Department	Name of the Supervisor	Name of the Ph.D. Scholar with Unique ID/ Photo ID	Mode of Ph.D. (Full Time/Part Time)	Registration Number	Date of Registration	Research Topic	Likely data of completion of Ph.D.	Availing Fellowship Yes/No	Funding Agency of Fellowship
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Note : This data should be updated as and when the new enrolment takes place.


Dean cum Offg Registrar
ICFAI University Sikkim

(Signature and Office Seal of the Dean (Academic Affairs))