

SRM UNIVERSITY KATTANKULATHUR -603203

Ph.D.	FT / PT	
Reg. No.		

NO DUES CERTIFICATE

(To be submitted along with Synopsis to the Controller of Examinations)

Name of the Research Scholar	:
Registration No	:

Faculty and Department :

Year of Completion :

Signature of the Scholar :

S1. No	Details	No Dues Certificate with Seal	Signature
1	Library		
3	Hostel Office (if applicable)		
5	International Relations (for Foreign Scholar)		
6	Directorate of Research		
7	Supervisor's Department		

Signature of the HoD (Name with Seal)

Signature of the Supervisor (Name with Seal)