



Dr. Babasaheb Ambedkar Technological University

(Established by Government of Maharashtra and Governed by Dr. Babasaheb Ambedkar Technological University
Act No. XXIX of 2014)
www.dbatu.ac.in

DBATU/EXAM/PhD/Course Work/2023/205
Date: 16/03/2023

Notification:

Sub: Exam form filling for Ph.D Course Work

The Research scholars enrolled for Ph.D programmes and appearing for the course work during the current semester i.e. Winter Semester 2022, need to fill up their exam forms in the prescribed format (the format can be obtained from the Examination Section), duly counter signed by the respective guide. The form **is to be submitted in the examination section on or before March 24, 2023**, in duplicate along with a photocopy of the fees payment receipt.

Schedule for Exam form Filling:

Course	Start Date	Last Date
Pre PhD Course Work	16/03/2023	24/03/2023




Controller of Examinations (I/C)

Copy to:

1. Hon'ble Vice Chancellor (For Information)
2. The Registrar (for information)
3. The Finance Officer
4. Principal/Director of all the affiliated institutes (for necessary action)
5. Head of the Departments of Dr. B. A. T. U. Lonere (for Necessary action)
6. OSD, Regional centers/Sub-Centers
7. Students Notice Board
8. University Website (www.dbatu.ac.in)

Ph. D**Dr. Babasaheb Ambedkar Technological University, Lonere- 402103****Application for Course Registration**Affix stamp
size photo

1. Name in full (in CAPITAL letters): -----

2. Roll / Enrollment Number :

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3. Class: **Ph. D** in-----

4. Semester: ----- Academic Year: -----

5. Details of the courses to be registered (attach attested photocopy of the fees payment receipt)

Sr. No.	Course Code	Semester	Full Title of the subject	Theory	Lab.	Fees to be paid
1						
2						
3						
4						
5						
6						
Total fees (in words)						

* I hereby declare that the application has been filled in by me and statement made therein are correct & complete.

Date:

Signature of the Applicant

For office use only: Receipt No.:**Date:****CASHIER**

Date:

Office Superintendent (Exam.)

Seal

Controller of Examinations



Dr. Babasaheb Ambedkar Technological University, Lonere- 402103

Hall ticket for Course Registration

Affix stamp
size photo

1. Name in full (in CAPITAL letters) : -----
2. Roll / Enrollment Number :

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3. Class: **Ph. D** in-----
4. Semester: ----- Academic Year: -----
5. Fee Receipt No. ----- Amount:----- Date: -----
6. Details of the courses to be registered (attach attested photocopy of the fees payment receipt)

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Signature of the Applicant

Office Superintendent (Exam.)

Seal

Controller of Examinations