

TATA INSTITUTE OF FUNDAMENTAL RESEARCH

(DEEMED UNIVERSITY)

Homi Bhabha Road, Colaba, Mumbai 400 005.

REGISTRATION FORM

SUBJECT BOARD : SCIENCE EDUCATION

DEGREE : Ph.D.

Name of the candidate			
Computer Code		Email	
Candidate's Department/Centre	Homi Bhabha Centre for Science Education, Mumbai		
Date of joining TIFR graduate programme			
Max. Qualification at the time of Joining TIFR graduate programme			
Date of completion of qualifying requirements for registration			
Name of Research Supervisor			
Advisor's Department/Centre	Homi Bhabha Centre for Science Education, Mumbai		
Provisional title of thesis			
Brief write-up of proposed research project	<i>(Please attach a separate sheet)</i>		
I hereby state that I have not registered for the above Degree with any other University.			
Date		Signature of the student	

I agree to supervise this student for the above thesis project		Research Supervisor is eligible to take the student	
Date	Signature of Research Supervisor	Date	Signature of Chairperson/Dean

The student has completed the qualifying requirement for registration			
Date		Signature of the Convener, Subject Board	

TO BE FILLED BY THE UNIVERSITY CELL, TIFR

Registration Number	_____ - _____	Date	___/___/___
Signature of the Assistant Registrar (Academic)		Signature of the Dean, Graduate Studies	