

Application for Change of Guide/ Co-Guide

1. Name of the Ph.D. Student:

2. Registration No.:	
3. School:	
4. Department:	
5. Category (Please tick): Full time/ Part time.	
6. Name and affiliation of the Guide:	
7. Name and affiliation of the Co-Guide:	
8. Date of Admission:	
9. Ph.D. coursework completed: Yes/No	
10. Title proposed at the time of submission of Synopsis (Plan of Research)	:
11. Progress of Research (Tick the relevant one):	
a. Literature survey	
b. Fieldwork/data collection/ experimental work going on.	
c. Analysis	
d. Publications	
e. Thesis Writing	
12. Name of the proposed Guide/Co-Guide:	
13. Reason for the change sought (Tick any one):	
a. Permanent or long-term departure from the University	
b. Prolonged health issues	
c. Technical reasons	
d. Long leave (for more than 1 year)	
e. Sad demise	
f. Others (specify)	
Signature of the Ph.D. Student	Date



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NOC from the present Guide/Co-Guide

I do not have any objection to the chang	ge.
Signature	
Present Guide/Co-Guide	
CONSENT FROM I	PROPOSED GUIDE/CO-GUIDE
I hereby give my consent to provide gui	deship/co-guideship to Ph.D. scholar
Mr./Ms	in the Royal School of
	, The Assam Royal Global University
Date:	Signature:
	Name:
	Designation:
	Organization:



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Resolution of Departmental Research Committee (DRC) on the proposal for cha	ınge
of Guide/ Co-guide. (w.r.t NOCs from existing guide/co-guide and new guide/	' co
guide)- With the attached copies of NOCs/ Consent letters.	
Approved/ Not Approved	
Chairperson, DRC	