**Annexure-15**

****

**MANAV RACHNA UNIVERSITY**

Sector-43, Aravali Hills, Faridabad

**NO DUES CERTIFICATE FOR Ph.D. THESIS SUBMISSION**

1. Name of the Ph. D Scholar : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Department : ­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Date of Registration : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Registration No : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Name of the Supervisor : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. Name of the Co-Supervisor :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. Thesis Title :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Verified that scholar has no outstanding dues with following Departments/Units to his/her credits.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S. No.** | **Department/ Section** | **Signature of Head of Department/Concerned Authority** | **Date** | **Remarks** |
| 1 | IT |  |  |  |
| 2 | Departmental Lab |  |  |  |
| 3 | Library |  |  |  |
| 4 | Accounts |  |  |  |
| 5 | Examination Cell |  |  |  |
| 6 | Ph.D. Office |  |  |  |

Signature of Scholar

Supervisor DRC Chairperson

Further, it is verified that Mr./Ms. ……………………………has paid all his/her dues including fine and other charges up to date and nothing is outstanding against him/her as on date. He/She may be allowed to submit his/her thesis as mentioned above.

Registrar, MRU