

OFFICE OF THE POST-GRADUATE STUDIES, (PGS)
NATIONAL INSTITUTE OF FOOD TECHNOLOGY ENTREPRENEURSHIP &
MANAGEMENT

Date: _____

Format for Extension of Ph. D Fellowship

- 1) Name:- _____ :
- 2) Department:- _____ :
- 3) Batch and Roll Number :- _____ :
- 4) Details of publication out of research work:- _____ :

(If required add separate sheet)

- 5) Details of conference / Seminar attended:-

- 6) Date on which became eligible for extension of fellowship as per regulation
- 7) Report of completed work (3-4 pages)
- 8) Work to be completed during extended period

(Signature of Student)

Recommendation of SAC

(Member)

(Member)

(Member)

(Supervisor)

(Member)

(Head of Department)

Note:-

- 1) Student must provide copy of title page of publications.
- 2) Application duly recommended by SAC and forwarded by HOD be submitted to Dean (PG) office