

**Ministry of Micro, Small and Medium Enterprises  
Office of the Development Commissioner (MSME)**

**Check List For Registration of Part-Time Ph. D. Programme**

1. Name of the Employee
2. Designation
3. Employee Code No.
4. Name of the Programme
5. Whether Course is Part-time/Full-time
6. Duration of the course
7. Name of the Institution
8. Date of Joining
9. Educational qualification
10. Name of the Guide
11. Residential requirement (if any)
12. \*Brouchure of the concerned University
13. \*Publications (issued by you)
14. What is your contribution to Ministry  
(Submit complete details)
15. Whether already permitted Completed/left/Incomplete/for this course, if so, status of  
unsuccessful the course .

**UNDERTAKING**

- i) After completion of my Ph. D work, I shall work for a minimum period of three years in the Ministry of SSI & ARI.
  - ii) Taking up the studies will not come in the way of discharge of duties assigned to me.
  - iii) I am aware that if a result of grant of permission , I acquire additional qualification that does not automatically render me eligible for promotion.
- \*(copy enclosed)

Signature of the Employee

Dated:.....

Remarks of the Controlling Officer

Signature of the Controlling Officer  
Name  
Designation