



17814 Ph.D. Chem
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BHARATHIDASAN UNIVERSITY
TIRUCHIRAPPALLI – 620 024

Phone No.: 0431-2407092, Fax : 0431-2407045, Email: office@bdu.ac.in

Website : www.bdu.ac.in

(Accredited with "A" Grade by NAAC)

Registrar

Ref.No.09625/Ph.D.K2/ Chemistry/Part-Time/April- 2017/ Date: 27.03.2017

To
Mrs. R. Shanmuga Priya
Assistant Professor
Department of Chemistry
Nehru Memorial College (Autonomous)
Puthanampatti – 621 007
Tiruchirappalli Dt .

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Sir/Madam,

Ref:Ph.D. Programme - Provisional Registration application No:Nil
Dt: 28.02.2017.

I am, to inform you that you have been provisionally registered for Ph.D. Degree under the **Part-Time** Category. As per the Ph.D. Regulations of this University, you have to carryout Research Work under the Research Supervisor for a Minimum Period of **Three** Years and a Maximum Period of **Five** Years from the date of registration i.e. from **01.04.2017 to 31.03.2022**.

Be it informed that, you will be governed by the regulations, rules and conditions for the Degree of Doctor of Philosophy of this University operative at the time of your registration. THE REGULATIONS FRAMED FOR THE COURSE WORK OF THE PROGRAMME IS ENCLOSED ALONGWITH THIS ORDER.

The Subject/Discipline of Research chosen by you is **Chemistry** and the broad topic of your Research is "**PHYTOCHEMICAL, PHARMOCOLOGICAL STUDIES AND BIOLOGICAL ASSAYS OF DRUG LEAD COMPOUNDS OF SELECTED MEDICINAL PLANTS IN INDIA**"

The Subject/Discipline cannot be subsequently changed. You are requested to quote the reference number cited above in all correspondence with the University regarding your Ph. D. Programme.

Yours Sincerely,


for REGISTRAR



Encl: As above.

P.T.O.

All communications are to be addressed to the Registrar only
Please quote our reference in all your replies.