



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)

17808
9.2.17
PhD CS/81

REGISTRAR

Ref.No.35242/Ph.D.K3/Computer Science/Part Time/January 2017/Date: 28.12.2016

To
Mr. S. Mohan
Assistant Professor
Department of Computer Science
Dr. S. Ramadoss Arts and Science College
Periyavadavadi
Vriddhachalam 606 104.

2/25 1.17

Sir / Madam,

Ref : Your application received on 19.11.2016.

I am to inform you that you have been provisionally registered for the Ph.D. Degree under **Part Time** category. As per the regulations of this University you have to carryout research work under Research Supervisor for a minimum period of **Three** years and a maximum period of **Five** Years from **01.01.2017** to **31.12.2021**.

I am also to inform that you will be governed by the rules, regulations, terms and conditions as stipulated for the Ph.D. Programme of this University operative at the time of your registration. **The Regulations framed for the course work for the programme is enclosed along with this letter.**

The Discipline/Subject of Research chosen by you is **Computer Science** and the broad topic of your research is **“Diagnosis of Skin Diseases using Data mining techniques”**.

You are requested to quote our reference number cited above in all correspondence with the University regarding your Ph.D. Programme.

Yours sincerely,

for REGISTRAR

Encl: as above.

PTO

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