



**DEPARTMENT OF EDUCATION**

University of Delhi  
Delhi-110007



The Chairperson  
DRC and BRS (Edu)  
Faculty of Education  
University of Delhi, Delhi-110007

**Subject: CHANGE OF TITLE/MINOR CHANGE OF TITLE**

Name		
Father's Name		
Date of Registration		Roll No.:
Supervisor		
Co- Supervisor		
Previous Title:		
New/Change Title:		
Recommendation of the Supervisor		
<i>Recommendation/Approval of the Advisory Committee</i>		
<i>Signature &amp; Recommendation of the RAC Member-1</i>	<i>Signature &amp; Recommendation of the RAC Member-2</i>	
Name: Prof./Dr.....	Name: Prof./Dr.....	

(Signature of the Scholar)

(Signature of the Supervisor)

(Signature of the Co-Supervisor)

Dated: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Mob: \_\_\_\_\_

Mob: \_\_\_\_\_

Mob: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_