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APPLICATION NO.:

APPLICATION FORM FOR PLAGIARISM CHECK

REFERENCE NO.	
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1. Name of the Candidate (Block Letters) :

2. a) Designation :

3. b) Name & Address of the the Organization. :

c) Address for Correspondence :

d) Telephone & Mobile No. :

e) E-mail Address :

4. Name of the Department :

5. Title of the Thesis :

6. Name of the Guide with Designation & Address :

Mobile No. :

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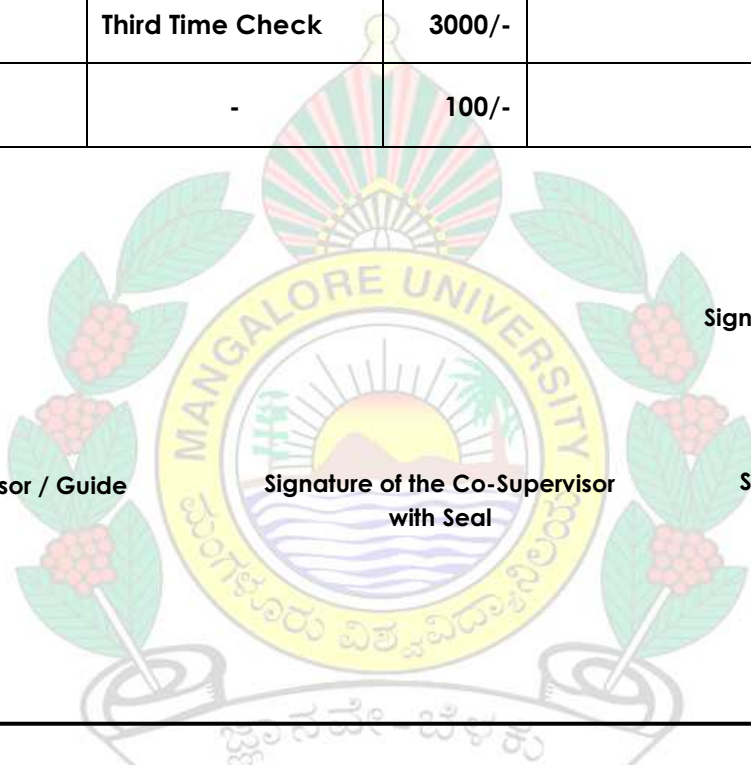
E- mail ID :

7. Fee Structure for Plagiarism Check :

Category	Fee Structure		State Bank of India (Mangalagangothri) Challan No. & Date
Thesis/Dissertation	First Time Check	300/-	
Thesis/Dissertation	Second Time Check	1000/-	
Thesis/Dissertation	Third Time Check	3000/-	
Research Paper	-	100/-	

PLACE :

DATE :



Signature of the Candidate

Signature of the Supervisor / Guide
with Seal

Signature of the Co-Supervisor
with Seal

Signature of the Chairman
with Seal

FOR OFFICE USE

The following enclosures are received along with this application in addition to the above

Enclosures:-

1. Fee Receipt.....
2. Soft copy of the Thesis in PDF as well as MS-WORD format.....

DR. T. Y. MALLAIAH
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