

# ACADEMY OF SCIENTIFIC AND INNOVATIVE RESEARCH

(AcSIR)

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1. Semester (January/August) & Year : \_\_\_\_\_
  2. Name of the Student : \_\_\_\_\_
  3. Phone & E-mail Contact : \_\_\_\_\_
  4. Enrollment/Registration (as applicable) No. : \_\_\_\_\_
  5. AcSIR Centre/Unit (Name of Institute) : \_\_\_\_\_
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6. Name of the Supervisor : \_\_\_\_\_
7. No. of working days : \_\_\_\_\_
8. No. of leave(s) take : \_\_\_\_\_
9. Nature of leave : \_\_\_\_\_
10. e-copy of progress report attached (Yes/No) : \_\_\_\_\_

11. Details of the Semester Tuition Fee paid (only through SBI Collect)
  - a. Date of payment : \_\_\_\_\_
  - b. Amount paid : \_\_\_\_\_
  - c. Payment Receipt Number : \_\_\_\_\_  
(**Copy must be attached**)

Accordingly, I hereby commit to continue my AcSIR academic/research work during the above semester as per program of enrollment and report progress of the semester to the Supervisor.

Date:

(Signature of the Student)

Countersigned by the Supervisor (with Date): \_\_\_\_\_

***To be submitted to AcSIR Latest by January 31<sup>st</sup> & August 31<sup>st</sup>***

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(For AcSIR Office Use)