



MALLA REDDY (MR)

(DEEMED TO BE UNIVERSITY)

Recognised Under Section 3 of The UGC Act, 1956, Vide Notification No.9-5/2025-U.3(A) by
Department of Higher Education, Ministry of Education, Government of India.



Application for Change of Supervisor

Date: _/_/_

To
The Dean
Research and Development Cell
Malla Reddy (MR) Deemed to be University
Maisammaguda, Medchal-Malkajgiri
Hyderabad, Telangana – 500100

Subject: Application for Change of Research Supervisor for Ph.D. Research

Respected Sir/Madam,

I, Mr. /Ms. _____, Ph.D. Research Scholar bearing Registration Number _____, in the School _____, Department of _____, submit this application for your kind consideration and approval regarding the change of my Research Supervisor.

I was registered for the Ph.D. programme in the A.Y. _____ under the guidance of Dr. _____, Designation: _____, School _____, Department: _____, Institution: _____.

Due to Discontinuation of supervisor / Personal reasons / others (_____), I request the University to kindly consider my application for change of Research Supervisor, in accordance with the rules and regulations governing the Ph.D. programme.

I request that Dr. _____, Designation: _____, School/Department: _____, Institution: _____, may kindly be appointed as my new Research Supervisor, subject to the approval of the University and the concerned authorities.

I request the competent authority to kindly consider my application and grant approval for the change of Research Supervisor.

Thanking you.

(Signature with Date)

Mobile No.: _____

Email ID: _____

Recommendations and Consent

Existing Research Supervisor

I recommend / have No Objection to the above request for change of Research Supervisor.

Signature with Date: _____

Name: _____

Proposed Research Supervisor

I hereby convey my willingness to supervise the above-mentioned Ph.D. Research Scholar, subject to the approval of the University.

Signature with Date: _____

Name: _____

Head of the Department

Recommended / Not Recommended

Signature with Date: _____

Name: _____

(For R&D Cell)

Approved / Not Approved

Dean (R&D Cell)

(Signature with Date)