

Admission for Ph.D. Programme: 2017

APPLICATION FORM

Name of the Faculty: -

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The Registrar,
VBS Purvanchal University
Jaunpur (U.P)
Through – Head of Department,

Sir/Madam,

The relevant particulars are given in SECTION A, below, and I enclose self-attested Photostat copies of my mark-sheets for the Examinations I have passed and other relevant Certificates/Documents.

I have read the Ordinances for the Ph.D. Degree and other Rules governing the same and accept the same as binding on me. I am fully aware that I can not be enrolled as Ph.D. student as long as I am duly enrolled as a student of any other Degree-granting course in the V.B.S. Purvanchal University, Jaunpur or any other university/Institution.

I declare that:

- 1. The information given by me in Section A, below and the documents enclosed with this FORM are true and correct, and no material fact has been concealed, and
- 2. I am aware that if it is discovered that I have submitted false information/documents, or concealed any information or facts, the admission granted on. Its basis shall stand cancelled with retrospective effect.

Place:	(Full Signature of Applicant)
Date:	(Full Name of Applicant)

SECTION–A (To be filled by the applicant)

Recent Photo of the Candidate

1.	Name (In Block Letters)	:				•••••		
2.	Father's Name	:	Sri					
3.	Mother's Name	:	Smt					
4.	. Date of Birth :							
5.	. Place of Birth :							
6.	Social Category	:	SC/ST/OBC/GEN					
7.	Special Qualification	on :		NET/SET/GATE > 75%/REGULAR CHER/ARMY/NRI/INDUSTRY/PUCRET				
8.	Permanent Address	:						
9.	E-mail Address w	ith :						
	Pin code							
	Mobile No.					•••••		
10.	Present Occupation Objection Certificate" of					employ	ment and en	close "No
11.	11. Academic Records (Please enclose self-attested Photostat copier of the mark-sheets of all the Examinations mentioned below and of your High School or equivalent Certificate)							
	Examination	Board/Ui	niversity	Year	Subjec	et	Division	Percentage
High	School							
Intern	nediate							
Gradı	uation							
Post-	graduation							
Other	rs							
12.	Subject offered at t	the Post-	graduate ex	kaminati	on:			•••••
	(For applicants fro	m the Un	iversity of V	J.B.S. Pu	rvanchal Unive	ersity, Ja	aunpur only	y)
13.	13. Year of the first enrollment in this University:							
14.	Enrolment No (give	en by V.E	3.S.P.U, Ja	unpur) :.			••••	
15.	15. Details of Degree-grating Course in which enrolled at present (if any)							
16.	16. Previous research work done (if any)							
17. Proposed Topic of Research for the Ph.D. Degree (Please enclosed a synopsis of your proposal, with bibliography in around 2000 words):								

SECTION-B

(To be filled by the Department or DRC, as the case may be)

18.	(a) Date of Interview:	
	(b) Date of Joining in the Department	·
19.	Topic assigned for research work (In B	lock Letters):
20.	Name of the Supervisor with address:	
	Note: The designated Supervisor	r should sign the following statement
	I hereby agree to supervise the Applica	ant on the aforementioned topic.
	Date	(Signature of the designated Supervisor)
21.	Remarks of the Head of the Department	(HOD)
(a)	Regarding Suitability of the Topic:	
(b) l	Regarding availability of material:	
(c) Th	he Applicant should obtain a Certificate of	Proficiency in
(d) Sp	pecial recommendation (in relevant cases) (Please use a separate sheet, if necessary, and
	append the same with this form)	
Forw	varded to the Dean of the Faculty	
Date:.		(Signature of the HOD)
22.	Recommendation of the Dean of the Fac	culty (Please score out A or B, Below, as appropriate)
	(a) Forwarded to the Research Degree Co	ommittee with the Remarks (if any)
	(b) Referred Back To The Department Fo	or The Reason (s) Specified as
	Date	(Signature of the Dean)

SECTION-C

(To be filled in the Research Degree Committee)

Recommendation of the Research Degree Committee (RDC)

Date of the RDC meeting:	
Signature of: Head of the Department (HOD)	Dean of the Faculty
Chairman, RD	OC .
SECTION-D (For Of	fice Notes)
Date of Enrollment	
Date of Dispatch of Letter	