JADAVPUR UNIVERSITY

FACULTY OF ARTS/SCIENCE/ENGINEERING/INTERDISCIPLINARY STUDIES, LAW & MANAGEMENT

(STRIKE OUT WHICH IS NOT APPLICABLE)



AFFIX ATTESTED RECENT PHOTOGRAPH

TO
THE REGISTRAR
JADAVPUR UNIVERSITY
KOLKATA – 700 032

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I HEI	REBY APPLY	FOR REGISTRA	TION AS	A PH.D	STUDE	NT FOR	THE D	EGREE (OF DOCT	OR OI
		RTS/ENGINEERI1								
OF	YOUR	UNIVERSITY	IN	THE	DEP	PARTME	NT/SCHO	OOL/INST	TITUTE	OF
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IF A	CCEPTED, I	SHALL ABIDE	BY THE	RULES	AND	REGULA	TIONS	OF THE	E UNIVE	ERSITY
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4. CA	ATEGORY: GE	NERAL/SC/ST/OF	C-A/OBC-	B/PHYSI	CALLY	CHALLI	ENGED			
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^{*}Mention subject/discipline ONLY when applying for the Ph.D programme offered by a School/Institute. (Strike out whichever is not applicable)

7. ADDRESS FOI	R COMMUNICAT	ION:				
MOBILE NO.						
PHONE NO						
E-MAIL						
8. PARTICULAR	S OF ACADEMIC	C CAREER:				
Name of the Examinations	Examination passed	Name of Institute/ University	Major Discipline	Year of Passing	Total Marks obtained	(%) Marks/CGPA
Madhyamik or Equivalent						
Higher Secondary or Equivalent						
Bachelor Degree						
Master Degree						
Post Master Degree						
M.Phil. (Two years regular course)						
 (i) ATTESTED COPIES OF ALL CERTIFICATES & MARK-SHEET OF DEGREES ETC. MUST BE ENCLOSED. (ii) MIGRATION CERTIFICATE, IN ORIGINAL, MUST BE SUBMITTED PRIOR TO DEPOSIT OF REGISTRATION FEES. 						
9. WHETHER Q		NET/SET/GATE/ANY EASE ENCLOSE RE	_		EXAMINATIO	N
10 PRESENT EMPLOYMENT/FELLOWSHIP (IN BLOCK LETTERS):						
NAME OF ORGANIZATION						

-	NATURE OF RESEARCH WORK/DUTY
	PROPOSED RESEARCH WORK: (A) PROPOSED AREA/THEME OF RESEARCH:
1	(B) STATEMENT OF PURPOSE REGARDING RESEARCH OBJECTIVE (WITHIN 100 WORDS)
	(C) DEPARTMENT/SCHOOL/INSTITUTION WHERE THE PROPOSED RESEARCH WORK IS TO BE CARRIED ON WITH ADDRESS
	YOURS RESPECTFULLY
DAT	E:
	EMPLOYER'S CERTIFICATE
TIM	SMT
PH.I	D. RESEARCH WORK AT JADAVPUR UNIVERSITY AS PERMITTED UNDER THE RULES.
DAT	E:
	OF THE EMPLOYER WITH OFFICIAL SEAL

PH.D. RESEARCH COMMITTEE

SELECTION OF CANDIDATE FOR <u>REGISTRATION FOR PH.D. PROGRAMME</u>

	DERED THE APPLICATION OFEGISTRATION OF NAME FOR PH.D. DEGREE	
1.	WE INTERVIEWED THE CANDIDATE ONQUALIFIED/NOT QUALIFIED	
2.	ADMISSION TEST: WAIVED/QUALIFIED/NOT QUAL	IFED
3.	WE HAVE CHECKED THE UNDER MENTIONED ORIG (1) MADHYAMIK/EQUIVALENT EXAM. (2) HIGHER SECONDARY/EQUIVALENT EXAM. (3) BACHELOR'S DEGREE (4) MASTER'S DEGREE (5) M.PHIL (6) OTHERS B.T./B.ED./B.LIB. ETC.	
DATE:		SIGNATURE OF THE HEAD OF THE DEPARTMENT/DIRECTOR OF THE SCHOOL & CHAIRMAN, PH.D. RESEARCH COMMITTEE WITH SEAI

SIGNATURE OF THE CONVENOR