



**APPLICATION FORM FOR PhD PROGRAMME-20-21**

<b>Application for the Department of .....</b>	<i>Please attached recent passport size photograph</i>
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**Personal Details (in Block Letters)**

<b>1. Full Name</b>										
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<b>2. Father's /Husband's Name</b>										
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<b>3. Address for Correspondence</b>										

<b>4. Permanent Address</b>										

<b>5. E-mail Id (In capital letters)</b>	
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<b>6. Phone/Cell No.1</b>										
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<b>Phone/Cell No.2</b>										
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<b>Land Line No.</b>										
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<b>7. Date of Birth (Please attach document for evidence)</b>	<b>D</b>	<b>D</b>	<b>M</b>	<b>M</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>8. Nationality</b>	
									<b>9. Name of the State to which you belong</b>	

<b>10. Gender (Male / Female)</b>	
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<b>11. Category(√)</b>	<b>UR</b>	<b>OBC</b>	<b>SC</b>	<b>ST</b>
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<b>12. If Physically Challenged (OPH Category) Percentage Disability</b>	
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<b>13. Details of Educational Qualifications</b>			
<b>Examination Passed</b>	<b>University/Board/Institution/Council of examination</b>	<b>Month, Year of Passing</b>	<b>No. of Extra Attempts</b>
Secondary (10 <sup>th</sup> )			
Senior Secondary(12 <sup>th</sup> )			
Undergraduate			
Postgraduate			
Other			

**Details of work experience:**

<b>14. Name of the Organisation</b>	<b>Period of Service</b>												<b>Designation</b>	<b>Nature of Duties performed</b>	<b>Total Monthly Emoluments</b>	<b>Reason for leaving Services</b>
	<b>FROM</b>						<b>TO</b>									
	<b>D</b>	<b>D</b>	<b>M</b>	<b>M</b>	<b>Y</b>	<b>Y</b>	<b>D</b>	<b>D</b>	<b>M</b>	<b>M</b>	<b>Y</b>	<b>Y</b>				

15. Provide Details of the JRF exam passed: \_\_\_\_\_
16. Please bring original and 02 sets of attested photocopies of related documents at the time of interview.
17. Details of Application Fee: NEFT UTR No. \_\_\_\_\_ Date \_\_\_\_\_ Amount Rs. \_\_\_\_\_.
18. I hereby declare that entries made in this form as above are true and correct to the best of my knowledge and belief. In the event of any information being found false/incorrect my candidature/ services are liable to be terminated without any notice. I \_\_\_\_\_ agree to abide by the terms and conditions of contractual appointment.

Place:

Date:

**Signature of the Candidate**