Application no (for office use only):

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**Application for Ph.D. program 2025-2026**

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| --- | --- |
| Advertisement Number and Date |  |

Self-attested photograph

(3.5X4.5 cm)

1. Full name (Capital Letter):
2. Name of Father/Husband:
3. Gender:
4. Date of birth: Age as on ……..
5. Marital status:
6. Address for correspondence:
7. Permanent address:
8. Contact no.:
9. Email:
10. Category: General/SC/ST/OBC (mark as applicable)
11. Physically handicapped (Yes/No):
12. Educational qualification: (10th onwards):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Qualification | Board/ University | Year of Passing | Subjects | % of marks/ CGPA |
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1. Details of national examinations Qualified: (CSIR/UGC, DBT, DST-INSPIRE, ICMR)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Sl. No | Name of the examination | Award letter no. & Date | Roll no. | Fellowship (Yes/No),  If yes, valid up to |
|  |  |  |  |  |

1. Experience details (if any):

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| --- | --- | --- | --- | --- |
| Sl. No. | Post Name | Name of Organization | Duration of Work | Nature of Job |
|  |  |  |  |  |
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1. Payments Details:

|  |  |  |  |
| --- | --- | --- | --- |
| Type of payment | DD No / Transaction ID | Drawn Bank | Date |
|  |  |  |  |

1. Title and duration of Masters project (if any):
2. Name and contact details of two referees:
3. List of enclosed documents:
4. Declaration:

I declare that the information furnished in this application form is true in all aspects and I understand that in case any entry or information is found to be false, my admission shall be cancelled/terminated.

Place:

Date: (Signature)