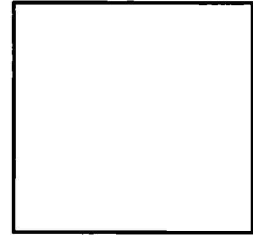


UNIVERSITY OF DELHI SOUTH CAMPUS
Faculty of Interdisciplinary and Applied Sciences

Application Form for Admission to Ph.D. Course

In the Department of.....

To,
Dean (Research)
Research Council
University of Delhi
Delhi – 110007



Sir,

I am applying for admission as a research student for the Ph.D. Degree of the University of Delhi in the Faculty of Interdisciplinary & Applied Sciences

I certify that the statements made below in columns 1 to 23 are true to the best of my knowledge and belief.

Yours faithfully

Date

Signature of the Candidate

- | | | | |
|----|--|---|-------|
| 1. | Name (in block letters) | : | _____ |
| 2. | Gender | : | _____ |
| 3. | Present Address | : | _____ |
| | Email | : | _____ |
| | Mobile number | : | _____ |
| 4. | Date of Birth | : | _____ |
| 5. | Nationality | : | _____ |
| 6. | University Enrolment Number | : | _____ |
| 7. | Name of Father or Guardian
(with relationship) | : | _____ |
| 8. | Name, Address and Occupation of
Father/Guardian | : | _____ |

9. Permanent Home Address :

10. Whether applicant belongs to SC/ ST/OBC :

11. Educational Institutions attended and Examination Passed starting with Matriculation/ Higher Secondary/SSC Examinations.

Name of Board/ University etc.	Examination passed	Year	Roll No.	Marks Obtained	Total No. of marks for the Examination	%age	Subjects offered and passed at the examination

12. Proposed Title of Research (In Block Letters)

13. Details of previous experience in research with publications, if any (If the space is not sufficient please attach a separate sheet).

14. State the name of the department and institution to which the candidate desires to attach him /herself.

15. State if residential accommodation is desired, if so, state name of the hostel.

16a. Is the candidate employed in any Institution? Give the name of the Institution, designation and nature of the work and date of appointment on the substantive post.

16b. If answer to 16a is yes, a certificate from the Head of the Institution in which the candidate is employed needs to be submitted. The certificate bearing the sign and seal of the Head of the Institution should state "I certify that the application is being made with my consent and permission."

- 17a. Has the student qualified a National Eligibility Test with research fellowship? : Yes/No
- 17b. If yes, state the source. : CSIR/UGC/DBT/ICMR/Any other (Please state the source)
- Any other :

18. Name and address of the supervisor recommended by the DRC.

19. Name and address of Co-supervisor, if any.

20. Names of the members of Advisory Committee with signatures.

- | | |
|-----------|------------|
| i. _____ | iii. _____ |
| ii. _____ | iv. _____ |

21. No. of scholars already registered with the proposed supervisor
(Please give names and date of registration)

Name	Date of Registration
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Signature of the Supervisor

22. The application was considered and approved in the DRC meeting held on

23. If the candidate does not have a research fellowship (i.e. 'NO' in Point No. 17a), whether his/her case is recommended by DRC for a University (NON-NET) fellowship.

Yes/No

**Signature of the Head of the Institution
(Seal)**

List of enclosure: