

Rajiv Gandhi Proudyogiki Vishwavidyalaya

(University of Technology of Madhya Pradesh) Airport Bypass Road, Gandhi Nagar Bhopal - 462 036

Phone: 0755 – 2678 833 Fax: 0755 – 2678 834 Website: www.rgpv.ac.in

Application form for Admission in Ph.D. Programme

Paste Recent Self attested Photograph

Please read the Ordinance 11 for Ph.D. and instructions given on the Portal before you fill up the form. Tick ($\sqrt{}$) the relevant box wherever provided. Attach attested copies of certificates/mark sheet in support of following information.

Branch / Subject: At Graduation: At Post Graduation					
Faculty Applied for:	Subject	(As per Annex.	A)		
Interdisciplinary (If yes, Name other Faculty)	Subject	ct (As per Annex.	. A)		
(Fill separate forms for each Department, In case of Interdisciplinary, form should be filled in main faculty only)					
Proposed Supervisor	Proposed Supervisor (Refer List of approved supervisor)				
Proposed Research Centre	(Re	efer the information at www.rgpv.ac.	.in)		
Proposed Title of Research					
Proposed Research Area (Broad Area)					
(Enclose Brief description of proposed work	In 500 words) (Attach Separate	Sheet)			
Name (in capital)					
Father's Name					
Gender Male □ Female □	Date of Birth: Date	Month Year			
Category: Gen ☐ SC ☐ ST ☐ OBC ☐	Category: Gen ☐ SC ☐ ST ☐ OBC ☐				
Mother's Name					
Address for Correspondence					
EmailID	City				
Tel No with STD Code	Mobile No				
Permanent Address					
Tel No with STD Code					

Qualifying Exam					(attach copy of Degree)			
	Duration of Course (Years)							
Name of Universit	y / Institute							
Year of Passing			-					
CGPA/Marks obta	ined in qualifyin	ig degre	e]	Max Marks	3			
(M.Tech/MPharm/	MCA/M.Sc./M.	Arch.)						
GATE/NET/SLE	v		•	am passed.	•			
Name of Exam								
Year of Passing		Ма	ırks obtained _			_ All I	ndia Rank	
Details of Marks Sco	ored in Examin	ation o	ther than qual	lifying exa	m			
Qualification			Univ./Ins	Vegr of		%Marks/CGPA		Enclo. No
10+2/Equivalent					<u>8</u>			
B.Sc.								
B.Tech./B.E.								
3.Pharm								
3.Arch.								
Any other								
Experiences								
Organization		Designation		1	From		То	Enclo. No.
					<u> </u>			
Names and addresse	es of two refere	nces the	ose are familia	r with you	r academic b	ackgr	ound.	
Name				Name _				
Designation				Designa	ution			
Address								
City								
Pin Tell no								
Email ID		Email ID						

Payment Details: (Demand Draft of ₹750 /- in favor of Registrar RGPV payable at Bhopal)

Number	Bank	Date	Issued Branch

Declaration

- a) I declare that all the information given by me in this application form is correct to the best of my knowledge and belief, and I understand that false of incomplete information would cause invalidation of the application.
- b) I shall abide by the decision of Rajiv Gandhi Proudyogiki Vishwavidyalaya, Bhopal in all matters pertaining to admissions in Ph.D. program. The decision of the university shall be final and binding on me.
- c) I shall abide by the rules and regulations of the university and research center.
- d) For all legal actions, suits and proceedings, the jurisdiction of court of law shall be deemed to lie exclusive at Bhopal.
- e) I have carefully read and understand ordinance 11 of the university for Ph.D. and I agreed to accept all terms, conditions and regulations.
- f) I shall abide by the rules & Regulation as per Ph.D. advertisement and subsequent notification if any.

Signature of the Candidate

N.B.:- All candidates for registration for the Ph.D. degree are requested to read carefully the Ordinance for Doctor of Philosophy of RGPV and to follow the provisions of the same.

Recommendation by Supervisor

I have discussed with him/her the crested in the work and the subject or in the execution of the research x month about actual work done as			
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x month about actual work done as			
orking under my supervision in any			
Full Name			
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N.B.:- All candidates for registration for the Ph.D. degree are requested to read carefully the Ordinance for Doctor of Philosophy of RGPV and to follow the provisions of the same.

UNDERTAKING

1,	S/o,D/o	State that I am aware that ragging in
any form is banned in RGI	PV and its affiliated institutions and do hereby und	lertake not to indulge in any form of ragging the
course of my study at RGP	V and its affiliated institutions.	
Date:		Signature of the Candidate
Place:	_	
I am aware that ragging is	in any form is banned in RGPV and its affiliated	ed institutions and that I agree to abide by the
punishment meted out to n	ny ward in case he/she is found guilty of ragging.	
Date		Signature of parent/Guardian
Place:		

(Certificate and Forwarding Note by the Employers)

1. Name of the Employing Orga	anisation:			
2. Type of Organisation:	Central Government		State Government	
	Government Autonomous		Organization	
	Public Sector Enterprise		Private Sector Industry	
	Private Engg. College			
3. Address of Administrative O	fficer/HR Manager:			
Phone:	Fax:			
Email:				
4. Designation of the employee	seeking registration for Ph.D	at RGPV:		
5. Employment Details:				
a) First joined on (date)	:			
b) Holding the present:				
Position since (date)				
c) Nature of Job:				
	duction, Marketing, Adminis			
Certified that, Mr./Ms		en	nployed as	
in this organization is sponsore	ed for admission to Full Tim	ne Ph.D. pro	ogramme of RGPV, Bho	pal. He/She has
been employed in this organiz	ration for the past y	ears in a re	egular cadre. If selected	as a sponsored
candidate the organization has	no objection to his/her une	dergoing th	ree years of full time s	tudies at RGPV
Bhopal and its approved Ph.D.	research centers.			
Signature of Applicant			Signature of Competen	t Authority

Name, Designation

Seal