

Rajiv Gandhi Proudyogiki Vishwavidyalaya

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

Phone: 0755 - 2678855, 2678801, 2678891 Fax: 0755 - 2678855 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 Fac	ulty) Subject	(As per Annex. A
(Fill separate forms for each Department	, In case of Interdisciplinary, form should be fille	ed in main faculty only)
Proposed Supervisor	(Refer List of approved	l supervisor)
Proposed Research Centre	(Refer the info	ormation at www.rgpv.ac.in
Proposed Title of Research		
Proposed Research Area (Broad Area)		
•		
•	work In 500 words) (Attach Separate Sheet)	
(Enclose Brief description of proposed v	work In 500 words) (Attach Separate Sheet)	
(Enclose Brief description of proposed v	work In 500 words) (Attach Separate Sheet)	
(Enclose Brief description of proposed v	work In 500 words) (Attach Separate Sheet)	
(Enclose Brief description of proposed v Name (in capital) Father's Name	work In 500 words) (Attach Separate Sheet)	
Name (in capital) Father's Name Gender Male □ Fema Category: Gen □ SC □ ST □ OBC	work In 500 words) (Attach Separate Sheet) ale Date of Birth: Date Month	Year
Name (in capital) Father's Name Gender Male Fema Category: Gen SC ST OBO Mother's Name	work In 500 words) (Attach Separate Sheet) ale Date of Birth: Date Month	Year
Name (in capital) Father's Name Gender	work In 500 words) (Attach Separate Sheet) ale Date of Birth: Date Month	Year
Name (in capital) Father's Name Gender Male Fema Category: Gen SC ST OBC Mother's Name Address for Correspondence	work In 500 words) (Attach Separate Sheet) ale Date of Birth: Date Month	Year
Name (in capital) Father's Name Gender Male Fema Category: Gen SC ST OBC Mother's Name Address for Correspondence	work In 500 words) (Attach Separate Sheet) ale Date of Birth: Date Month C CityState	Year
Name (in capital)	work In 500 words) (Attach Separate Sheet) ale Date of Birth: Date Month C CityState	Year

Oualifying Exam						(attach	copy of Degree)		
	m (attach copy of Degree) Duration of Course (Years)								
Name of Universit	y / Institute								
Year of Passing									
CGPA/Marks obta	ined in qualifyii	ng degre	eel	Max Marks					
(M.Tech/MPharm/	MCA/M.Sc./M	Arch.)							
GATE/NET/SLE	T/GPAT or any	y other	equivalent Exa	m passed.					
Name of Exam									
Year of Passing		Ma	arks obtained _			_ All In	dia Rank		
Details of Marks Sco	ored in Examin	ation o	ther than anal	ifving exai	m				
Qualification	ls of Marks Scored in Examination of Marks Scored in Examination of Alberta Specialization		Univ./Inst.		Year of Passing	%Marks/CGPA		Enclo. No.	
10+2/Equivalent									
B.Sc.									
B.Tech./B.E.									
B.Pharm									
B.Arch.									
Any other									
Experiences									
Organizat	Organization		Designation	From			То	Enclo. No.	
Names and addresse	es of two refere	nces the	ose are familia	r with you	r academic b	ackgro	und.		
Name				Name _					
Designation				Designa	tion				
Address				Address					
City				City					
Pin	Tell no			Pin		Tell	no		
Email ID				Email II)				

Payment Details: (Demand Draft of Rs 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

Recommended for acceptance of appl	ication of Mr/Ms	for registration in the
subject under the	faculty of	I have discussed with him/her the
whole aspect of the proposed research work,	found the applicant rea	ally interested in the work and the subject
finalized for the research is as mentioned in the	ne application.	
If selected for registration in Ph.D.	program, I shall guide	him/her in the execution of the research
work/Course work and shall be sending programmer.	ress report periodically e	every six month about actual work done as
per requirement in Ordinance 11 of the Univer	rsity.	
There are candidates	already registered who	are working under my supervision in any
of the university in India as well as ab	road.	
Place	Signature of the Supe	ervisor
Date	Full Name	
	Designation	
	Institute/Research Ce	entre
Forwardi	ng Note by Research	Centre
Torwardi	ng Note by Research	centre
Forwarded. The Candidate Mr/Ms	will t	be provided with all necessary facilities in
respect of Library, Laboratory etc. from this	institution/department f	for which it is fully equipped, if he/she is
selected for registration for Doctoral degree	e in the subject	, there being post graduate
teaching here in the said subject.		
	Signature ar	nd Name of the Principal/Head of the
	Institution /D	Department.
	Name of the	College Department
	Official Seal	
Place		
Date		

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

I,	S/o,D/o	State that I am aware that ragging in
any form is banned in RG	PV and its affiliated institutions and do h	nereby undertake not to indulge in any form of ragging the
course of my study at RGl	PV and its affiliated institutions.	
Date:		Signature of the Candidate
25 2	in any form is banned in RGPV and it my ward in case he/she is found guilty of	ts affiliated institutions and that I agree to abide by the ragging.
Date		Signature of parent/Guardian

(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.I	o. at RGPV:		
5. Employment Details:				
a) First joined on (date)	:			
b) Holding the present:				
Position since (date)				
c) Nature of Job:				
(R & D, Design, Prod	duction, Marketing, Adminis	trative, Tead	ching)	
Certified that, Mr./Ms		en	nployed as	
in this organization is sponsore	ed for admission to Full Tin	ne Ph.D. pro	ogramme of RGPV, Bho	pal. He/She has
been employed in this organiz	ation for the past	years in a r	egular cadre. If selected	as a sponsored
candidate the organization has	no objection to his/her un	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