



DESH BHAGAT UNIVERSITY



MAIN CAMPUS : MANDI GOBINDGARH (Pb.)

H.O. : CHANDIGARH

(A Context of Innovation. Research and Entrepreneurship)

APPLICATION FOR ENTOLLMENT FOR M.PHILL / Ph.D COURSE WORK

(To be submitted to the Head of Concerned Department)

- a) Subject
- b) Faculty
- c) Department/Approved centre of the University
Where research work will be carried out

Eligibility Criteria

Through Entrance Test

Year of qualifying entrance test _____

Roll No. _____ Score / Merit _____

Direct Admission (No Entrance Test)

Specify: UGC-CSIR/NET (JRF)/SLET/GATE/Teacher Fellow/ M.Phil/ DST (INSPIRE)/ ICMR/
ANY OTHER NATIONAL AGENCY FELLOW

PLEASE USE CAPITAL LETTER IN FILING THE FORM

1. Name of the Applicant _____
2. Sex (Male / Female) _____
3. Category SC / ST / OBC / GEN _____
4. Date of Birth _____
5. Father's Name _____
6. Mother's Name _____
7. Nationality _____
8. Do you wish to reside in University Hostel? Yes / No
9. Address for Correspondence _____

10. Permanent Address _____

11. Phone No. with STD Code _____ Mobile _____

12. Email _____

13. Nature and Status of Employment of the Candidate _____

(NOC from Employer be enclosed).

14. Whether receiving any Scholarship / Fellowship? If yes, it's Nature, Amount, Tenure and Source.

15. Educational Qualification :

Name of Examination	University / Board & Year of Passing	Subjects Studied	Marks Obtained	%age of Marks / Grades
Matriculation				
Graduation				
Post Graduation				
Any Other				

UNDERTAKING

I _____ S/o D/o Sh. _____ age _____
R/o _____ District _____ State _____ hereby declare/clarify
that the above information and attached documents are true to the best of my knowledge and belief and
nothing has been concealed therein. I am fully aware of the fact that if the information given by me proves
to be wrong. I will be punished under law and I will be summarily expelled from the institution where I had
got admission on the basis of the false information. Further I Undertake to abide by all ordinances, rules,
regulations & instructions of the University, which I have read.

Signature of the Candidate

CERTIFICATE/CONSENT BY THE SUPERVISOR

It is certified that:

- (i) I _____ hereby give my consent to guide Mr./Ms. _____
For his/her Ph.D degree. Further I do not have any close relationship with the candidate.
- (ii) Presently _____ Ph.D research students are registered with me and _____ students
Including the present one are enrolled with me for Ph.D degree.
- (iii) My date of retirement is _____.

Date: _____

Signature of the Supervisor

Designation: _____

Address: _____

Phone No. _____

E-mail ID _____

