



ANNEXURE - III

**APPLICATION FOR RECOGNIZING AS ELIGIBLE
RESEARCH SUPERVISOR
(For Eligibility Refer Ph.D Regulations)**

1. Name inBLOCK Letters :
(as entered in the
qualifying degree
certificate)

Affix a
recent
passportsize
photograph

2. Designation andpresent
officialaddress :

.....

.....

.....PIN.....Phone (with areacode).....

Mobile.....

3. Permanentaddress :

.....

.....

.....PIN.....Phone (with areacode).....

Mobile.....

4. Address for communication :

.....

.....

.....PIN.....Phone (with areacode).....

Mobile.....



5. a) Date of Birth (DD / MM/YYYY) : b) age :
- c) Email id :
- d) Date of Joining (VMRF (DU)) :
- e). Probable Date of Superannuation :

6. Academic Qualification (Details of all the degrees taken, starting with the highest degree)[Please attach attested copies of all the degree certificates]

Degree	Year	University	Subject	Faculty	Class / Division	Mode: Regular / Dist. Edu / etc...
a) Ph.D.						

7. Teaching experience(Regular) (Enclose the Experience Certificate as mandatory duly signed by the Employers)

Programme	Year(s) (From - To)	Institution	University	Subject
Postgraduate				
Graduate				



8. Research experience (Enclose the Proof)

	Year(s)	Institution	University	Subject	No. of papers published in Referred / indexed journals
Ph.D.					

9. Ph.D.details

University	Subject & title of thesis	Faculty/ Division	Date of Viva - Voce

10. List of publications after the award of the Ph.D. degree, in referred/indexed journal(s) (If needed an additional sheet may be used) (Enclose the latest two publications as Proof)

S. No.	Title of paper	Names of authors	Name of the journal	Scopus/WOS, UGC Care (ISSN No.)	Vol . No .	Year

11. Subject / Division and Faculty in which supervisorship is presently sought:

Subject(Division) :
Faculty :



12. Particulars of supervisorship held (in this and all other Universities)

S. No.	University	No. of candidates		Remarks (if any, on completion date etc)
		As Supervisor	As Co - Supervisor	

This is to certify that the particulars given above are correct and complete to the best of my knowledge and belief. I am aware that any wrong information or suppression of facts may result in punitive action in addition to cancellation of my candidature.

Date :

Seal

Signature

Forwarded

Head of the Department
Name in BLOCK LETTERS:

Head of the Institution
Name in BLOCK LETTERS:

Date :

Date :

Seal

Seal

Note: Journal publications should be listed as per proforma below.



Proforma For Publication and Conference

Name of the Supervisors											
Faculty											
Dicipline											
Journal Publication Details						Indexed Journal					
S.NO	Name of the Authors	Title of the Paper	Name of the Journal	Publication Details (Volume / Issue Page Number) if Book / Chapters ISSN No.	Month / Year	SCOPUS	Web of Science	PUBMED	IEEE	UGC	URL Link
*Copy of the Reprint to be Enclosed											