SESSION

Application No.:

FULL TIME / PART TIME



SUBJECT

Name of the Applicant (IN Block Letters)

திருவள்ளுவர் பல்கலைக்கழகம் THIRUVALLUVAR UNIVERSITY

SERKKADU, VELLORE - 632 115

APPLICATION FORM FOR ADMISSION TO Ph.D. DEGREE PROGRAMME

[To be sent Through Proper Channel]

| Note: | Candidates should submit their application on or before 1° April for APRIL SESSION, 1° July for JULY SESSION, 1° | | | | | | | |
|---|--|--|--|--|--|--|--|--|
| October for OCTOBER SESSION and 1 st January for JANUARY SESSION | | | | | | | | |
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| | S | N | Marital status | | Date of Birth (Evidence to be enclosed | | | | d) Age | | | |
|---|---|----------|-------------------|---------|--|------------------|------------------|------------|-------------|-----------|---------|-------|
| | Male | Fem | ale | | | Date | N | lonth | Year | | Ag | |
| | | | | | | | | | | | | |
| I | Natio | onality | | Religi | on | | Comm | unity (Ev | idence to b | e enclose | ed) | |
| | Indian | Fore | eign | | | ОС | В | C N | IBC / DNC | SC | | ST |
| | | | | | | | | | | | | |
| | Address to should be so Number. | | | | | | | | | | | |
| | Acaden Qualifica | | Name o Institu | | | ersity / oard | Year of Study | N | lajor | % of Ma | | Class |
| - | SSLC | | | | | | | | | | | |
| | PUC / HSS | | | | | | | | | | | |
| ļ | Bachelor's [| Degree | | | | | | | | | | |
| | Master's De | gree | | | | | | | | | | |
| | M.Phil. Degree | | | | | | | | | | | |
| ı | te: Attested) | Kerox co | py of Pass | / Provi | sional / | Degree / I | Diploma C | ertificate | s must be e | enclosed. | | |
| | Professional Experience Start from the present employment giving full details of duration | | | t | Name o | of the Inst | itutions w | here em | oloyed | From | 1 | То |
| | of each emp [Service Cer enclosed]. | oloymen | ıt. | | | | | | | | | |
| | Whether Hi | | Qualificat | | - | ost of Lee | cturers ha | s approv | ved by the | \ | res / N | 0 |

| 8. | Furnish Research experience already gained | |
|-----|--|--|
| | [Details of the Themes of Study, Research Work | |
| | carried out, Technical aspects of the work etc.] | |
| 9. | Whether He / She has been awarded Fellowship | |
| | like UGC, CSIR etc. If yes, enclose attested Xerox | |
| | copy of the Award Letter with date of Award etc. | |
| 10. | Award, Medals, Prize and Honours achieved in | |
| | His / Her Career. | |
| 11. | Any other particulars He / She Should like to | |
| | present for the consideration of the authorities. | |
| 12. | Whether He / She has already registered for | |
| | Ph.D. / M.Phil. Course etc. If yes, give details. | |
| 13. | Whether He / She has any publications / Articles | |
| | to His / Her credit. If yes, close copy of | |
| | publications. | |
| 14. | Title of the Proposed research topic with broad | |
| | theme [in block letters] | |
| 15. | Name, Designation and Institution / College | |
| | where the proposed Research Supervisor / Guide | |
| | is employed. | |
| 16. | No. of candidates registered under the supervisor | |
| | Guide. | |
| 17. | Date of Retirement of the Supervisor / Guide | |
| 18. | Supervisor's / Guide's comments with signature | |
| | about the suitability of the candidate for | |
| | Research and consent. | |
| 19. | Consent of the Head of Institution / College for | |
| | permission to do Research and to provide | |
| | necessary facilities with signature and Seal | |
| 20. | Consent of the Head of Institution / College | |
| | where the candidate is employed for permission | |
| | to do research with Signature and Seal. | |

THE ABOVE PARTICULARS GIVEN ARE CORRECT TO THE BEST OF MY KNOWLEDGE

| | ГΑ | T | \sim | | |
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DATE: SIGNATURE OF THE APPLICANT

SELF DECLARATION FOR FULL-TIME CANDIDATE

I declare that I am not working anywhere else either as a Full-time or Part-time Basis



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[To be filled in by the Supervisor / Guide concerned]

| S.No. | I | Name of the Candidate | Whether Stipendiary or Non-Stipendiary | Whether Full- time or Part-time | When Registered | When likely t submit Thesi | | | | |
|-------------|----|--|--|------------------------------------|--------------------|----------------------------|--|--|--|--|
| A) | | (B) | (C) | (D) | (E) | (F) | | | | |
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| 10. | | | | | | | | | | |
| | 2. | Please indicate the Number of Non-Teaching Candidates already registered under your Guidance. Whether the Supervisor is recognized to Guide students leading to Ph.D. Programme. If yes, furnish the No | | | | | | | | |
| e of the Su | | Programme. [Enclose Xero | x copy of the communicat | ion] SIGNATURE OF | THE SUPERVI | SOR / GUIDE | | | | |

ELIGIBILITY:

For purposes of admission to Ph.D. Programme, an applicant should have obtained a Master's Degree with not less than Second Class or Equivalent Grade. In the case of Examinations, where classification does not exit, a minimum of 50% Marks is needed in the qualifying examination.

Applicant should submit their application in the concerned departments where they desires to do Ph.D. Programme on or before 1st April for APRIL SESSION, 1st July for JULY SESSION, 1st October for OCTOBER SESSION and 1st January for JANUARY SESSION.

Research Follows / Research Assistants / Technical Assistants / Project Assistants / Training Officers in Extension Departments approved by the University, appointed in the Research Projects funded by recognized agencies / Government are also eligible to register for the Ph.D. on a Full-time in the same Department provided they satisfy the eligible criteria laid in.

There shall be following categories of candidates registered for Ph.D. Degree Programme:-

- 1. Full-time (with or without Stipend or Fellowship)
- 2. Part-time (Teacher or Non-Teacher vis-à-vis External)

Both the categories may register at the recognized Departments, Colleges or Research Institutions coming under these regulations.

INSTRUCTIONS

- 1. The filledin application should be sent to the concerned Head of the Department of the University / Principal of the College / Director of recognized Research Institutions.
- 2. Column Nos.13 to 19 are to be filled by the Supervisor, Head of the Department and Head of the Institution / College repetitively.
- 3. The testimonials / certificates as required in the application form should be enclosed.
- 4. Part-time applicant should enclose the following certificates along with application:
 - a) A service certificate from the Head of the Institution / College where the applicant is employed indicating the Date of appointment, Nature of appointment (i.e. whether Permanent or Temporary or Leave Vacancy etc.) should be furnished.
 - b) If there in any break is service if it is a continuous services, the details should also be furnished.
 - c) A certificate from the Director of Technical Education / District Educational Officer stating that the Polytechnics / Higher Secondary / High School where the teacher is employed has been recognized by the Government.



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SERKKADU, VELLORE - 632 115

APPLICATION FORM FOR REGISTRATION FOR Ph.D. DEGREE PROGRAMME

[To be sent Through Proper Channel]

| | FULL-TIME / PART- | TIME [TEA | CHING / NON | -TEACHI | NG] | | | | |
|------------|---|-------------|----------------|-----------------|-----------|-------------------------|------------|-----------------------|--|
| Nan Den | e of Payment: ne of the Bank: nand Draft No.: punt Rs | | | | | For DD sec | tion use | | |
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| 1. | Name of the Applicant Certificate] in BLOCK LE | _ | | ee | | | | | |
| 2. | Date of Birth | | Sex | | Com | munity | Na | ationality | |
| 3. | 3. Residential Address of the Applicant with contact Phone Number | | | | | | | | |
| 4. | If Part-time, Please furn / Occupation / Official A | | tails of Desig | gnation | | | | | |
| | State The Qualification: Note: Candidates should [Transfer certificate will be | enclose the | - | _ | _ | nsfer Certificate | along witl | h the application | |
| 5. | Name of the Exam Passed University | | versity | Register Number | | Month & Year Passing | _ | f Date of Convocation | |
| | | | | | | | | | |
| 6. | Name of College or I qualified for the P.G. De | | through wh | nich the | applicant | | _ | | |
| 7. | If the Examination is [Original] and its Reg application | • | | | | | , | YES / NO | |
| 8. | Whether the Applicant is undergoing any other course in the University or in any other University? [If yes, please furnish details] | | | | | | | | |
| 9. | Name of the Department of Thiruvalluvar University or College affiliated to this University where the Applicant proposes to conduct Research. | | | | | | | | |
| 10. | Whether the Department has been recognized by the University for conducting Research. YES / NO | | | | | | | | |
| 11. | Broad field of Research [in CAPITAL LETTERS]: The subject of research shall be one which relates to the main branch of knowledge chosen for the Post Graduate Degree. [Note: The Exact Title of Thesis may not be given at the time of Registration]. | | | | | | | | |
| | | | | | | | | | |
| 12. | Name and Designation under whom the Appl work. | | • | | | | | | |

| | | ether the applicant has obtained permission lege / Research Institution and if yes enclose | YES / NO | | | | | | | | |
|-----|---|---|----------|----------------------|----------|-----------------------|--|--|--|--|--|
| 13. | b). Wh | ether the applicant obtained sponsorship ce hority i.e. UGC/CSIR etc and if yes enclose a | YES / NO | | | | | | | | |
| | | date of joining the department / College for | | | f the | | | | | | |
| | joining report through the Guide / Supervisor] | | | | | | | | | | |
| 14. | a). Whether the Supervisor is a Recognized to Guide Ph.D. Research. YES / NO | | | | | | | | | | |
| | b). No. | and Date of Communication of this University | ity in v | vhich the | No.: | • | | | | | |
| | - | ervisor has been Recognized as Supervisor / | • | | | | | | | | |
| | | close Xerox copy of the same]. | | ŭ | Date: | | | | | | |
| 15. | | f Superannuation of the Supervisor / Guide | | | | | | | | | |
| | Wheth | er the candidate is related to the Supervi | sor / | VIII / N. O. | Nat | ture of Relationship | | | | | |
| 16. | | If yes, please state the nature of Relationshi | - | YES / NO | | | | | | | |
| 17. | The Na | me of Candidates now doing Research unde | r His / | Her Supervisor / G | uide for | Ph.D. Degree | | | | | |
| | | [to be filled in by | the Su | pervisor / Guide] | | _ | | | | | |
| | S.No. | Name of the Candidate | Mor | nth & Year of Regist | ration | Full-time / Part-time | | | | | |
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| 18. | Signati | ure of the Supervisor / Guide with seal | | | | | | | | | |

Station:

Date:

Signature of the Applicant

Signature of the Head of Institution / College where the applicant is working with seal

Signature of the head of the institution / college / Head of the department of the university where the applicant is proposes to conduct research with seal

IMPORTANT NOTE:

THE FOLLOWING DOCUMENTS SHOULD BE ENCLOSED ALONG WITH THE REGISTRATION APPLICATION FORM OTHERWISE THE APPLICATION WILL BE LIABLE TO BE REJECTED

- 1. Demand draft for Rs.600/- drawn in favour of "the Registrar, Thiruvalluvar University payable at Vellore" towards fee for
- 2. P.G. / M.Phil. Degree Certificate in Xerox copies with attested.
- 3. In the case of candidate qualified for M.Phil. Degree and other Degrees equivalent thereto are requested to enclose an attested Xerox copy of the P.G. Degree Certificate
- 4. Transfer certificate in original for the course last studied and issued by the competent authority for verification and return.
- 5. Attested Xerox copy of the permission letter received from the Registrar, Thiruvalluvar University, Vellore.
- 6. In the case of candidate who have qualified for their P.G. / M.Phil. Degree from other Universities such candidates have to apply for Recognition in the prescribed application form together with attested Xerox copies of the certificates.

INSTRUCTIONS TO THE CANDIDATES

After obtaining the approval letter from the Registrar, Thiruvalluvar University the following procedures should be followed.

- a. Joining Report as well as prescribed fee should be forwarded to the Registrar, Thiruvalluvar University through the Department / College / Institution.
- b. Registration form along with the DD for Rs.600/- drawn in favour of the Registrar, Thiruvalluvar University payable at Vellore and copy of the Joining Report. Copy of the approval letter from the University. Photocopy of P.G. Degree or if the candidates has qualified M.Phil. Degree M.Phil. Photocopy should be forwarded through the Heads of the Department / Principal of the College / Head of the Institution.
- c. If the candidate belongs to other Universities, they have to forward the Recognition application, the prescribed fee and all the attested Xerox copies of certificates (including syllabus, copy of degree certificate) to this University for recognition of their PG Degree as equivalent to the corresponding degree of this university.
- d. If the candidate has not studied any course in this University, they have to obtain and forwarded the Return of Matriculate form, with the prescribed fee to this University.
