Application No: Issued on:





Eachanari Post, Pollachi Main Road, Coimbatore - 641 021 Tamil Nadu, INDIA | Ph: +91 422 6453777, 6471113-5, 2980011-14 Fax: +91 422 2980022, 23, E-mail: info@karpagam.com www.karpagamuniv.com

Subject:			Full-T	ime	Part-	Time	
Details of Application fee: Cash Receipt / DD N	0	Dt	Bank				
1. Name (in BLOCK letters) (as in the HSC Ma	·			Paste	e a recent	nassnor	+
2. Sex (✓): Male Female 3. Date of E	Birth: Date N	Month Year	4. Age:		ize photog		L
5. a) Community:(Attested xerox copy should be enclosed)	· ·	the Caste: munity Certificate)		D	O NOT ST	APLE	
6. Nationality:	7. Mother To	ongue:	8. Marital	Status: ₋			
9. Religion:	10. Place of	Birth:					
11. Native District:			12.Annual	Income	:		
13. Parent's/Guardian Occupation:							
14. a) Office Address		b) Residential Ado	Iress				
PIN:			PIN:				
c) Communication Address		15. Name, Occupa	tion and Address of	Father/(Guardiar	n/Spou	se —
PIN:		Ph:	PII	N:			
16. Phone (0):	(R)		Mobile:				
17. E-mail-1		E-mail-2					



APPLICATION FOR ADMISSION TO Ph.D., PROGRAMME

18. Academic particulars (Attested copies to be attached)

Exam Passed	Board/University	Month & Year of passing	Duration of course	Class obtained	Major Subjects	% of Marks obtained
HSC or Equivalent						
Bachelor's Degree						
Master's Degree						
M.Phil						

19. Professional details: (Certificates to be attached separately)

Designation	Institution	Dura	ation	То	tal Per	iod	Particulars of
		From	То	Υ	М	D	work done

(Note: Part time candidates must enclose No Objection Certificate in Original from the present employer)

- 20. Details of proposed research:
 - a) Broad field of research:
 - b) Tentative topic (Enclose a brief write-up in 250 words):
- 21. Awards/Medals/Prizes/Honours conferred, if any:
- 22. Any other particulars/Specific research interest, if any:

The particulars furnished in the application are true and correct. In case, any particulars furnished in the application are found incorrect, I agree to forfeit my admission, no matter at what stage of the course I will be at that time.

Place:	
Date:	Signature of the candidate



Certificate to be furnished by the Supervisor/Guide

		at		
ve as supervisor for Thiru/Ms			for Full t	ime/Part time Ph.D.,
				ll be (in Capital Letter)
				_
				(vide
nication No	_Dt)	
_	nolars who are purs	suing research under my guic	dance and have no	t yet submitted their
Name of the can	didate	M.Phil./Ph.D.	Full time/ Part time	Date of Registration
	rve as supervisor for Thiru/Ms in recognised as a guide by Karp gree in nication No nave the following research sch	rve as supervisor for Thiru/Ms in recognised as a guide by Karpagam University for gree in nication NoDt nave the following research scholars who are purs	in the broad fingered as a guide by Karpagam University for guiding research work of gree in Dt ave the following research scholars who are pursuing research under my guids:	rve as supervisor for Thiru/Ms



Certificate to be furnished by the H.O.D. / Director and Registrar

Thiru/Ms. —	 is recommended for admission and Registration
to Ph.D., Full Time / Part Time programme under	
in the Department of	
Necessary facilities will be provided to the candidate to pursue his / her research	n programme.
The above recommendation is made in accordance with the University guideline	s
The above recommendation is made in accordance with the oniversity gaideline	3.
Signature of the H.O.D. / Director	Signature of the Registrar
SOD OSSIGS USS ON	
FOR OFFICE USE ON	LY
Student Code : Key	:
Guide Code : O.M. No	.:





(University copy)

Karpagam University

Admission to Ph.D., Programme Entrance Test / Interview - Hall Ticket

(To be filled in and sent along with the filled in application form)

Cou	rse Ph.D., FT/PT			
Subje	ect:	Register No.:		
			(For Office use)	Paste a recent passpor size photograph
1. 1	Name :			
2. 5	Sex : Male Female			
3. [Date of birth: Date Month Year			DO NOT STAPLE
4. [Date of the entrance Exam/Interview:			
5. <i>A</i>	Address for communication:			
Signa	ature of the Candidate			Registrar
K U Karpa (Estal	ARPAGAM NIVERSITY gam Academy of Higher Education blished Under Section 3 of UGC Act, 1956)	Admiss Entrance T	agam University on to Ph.D., Programme est / Interview - Hall Tic ent along with the filled in application	(Candidate o
K U Karpa (Estal	A R P A G A M N I V E R S I T Y gam Academy of Higher Education blished Under Section 3 of UGC Act, 1956) ITSE Ph.D., FT/PT	Admiss Entrance T (To be filled in and s	on to Ph.D., Programme est / Interview - Hall Tic	(Candidate o
K U Karpa (Estal	ARPAGAM NIVERSITY gam Academy of Higher Education blished Under Section 3 of UGC Act, 1956)	Admiss Entrance T (To be filled in and s	on to Ph.D., Programme est / Interview - Hall Tic	(Candidate o
K U Karpa (Estal	A R P A G A M N I V E R S I T Y gam Academy of Higher Education blished Under Section 3 of UGC Act, 1956) ITSE Ph.D., FT/PT ect:	Admiss Entrance T (To be filled in and s	on to Ph.D., Programme est / Interview - Hall Tic	(Candidate of second passport) Paste a recent passport
K U Karpa (Estal Cou Subje	A R P A G A M N I V E R S I T Y gam Academy of Higher Education blished Under Section 3 of UGC Act, 1956) ITSE Ph.D., FT/PT ect:	Admiss Entrance T (To be filled in and s	on to Ph.D., Programme est / Interview - Hall Tic	(Candidate of second passpor
K UNAUPA (Estal Cou Subject 2. S 3. [A R P A G A M N I V E R S I T Y gam Academy of Higher Education blished Under Section 3 of UGC Act, 1956) Irse Ph.D., FT/PT ect: Sex : Male Female Date of birth :	Admiss Entrance T (To be filled in and s	on to Ph.D., Programme est / Interview - Hall Tic	(Candidate of Action (Candidat

Signature of the Candidate

Registrar





Karpagam University

Application for the Identity Card

Name:	-
Address:	Paste a recent passport – size photograph
	_ DO NOT STAPLE
	_
Father's Name:	
Regd. No.: (for office use only):	
Course Ph.D., in (FT/F	PT)
Blood Group:	
Date of Birth: Date Month Year	
Phone No.:	
Mobile No.:	
Valid unto: (for office use only)	

Student Signature