

MAHARSHI DAYANAND UNIVERSITY, ROHTAK

No. _____

Application for Registration to Doctor of Philosophy (Ph.D.)

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To

The Head
Department of _____
M.D. University,
Rohtak

Sir,

I intend to get myself registered for Ph.D. Programme in the Department of _____, M.D. University, Rohtak and submit the following particulars in support of my candidature. I have read the Ordinance for this course and undertake to abide by its provisions faithfully.

PARTICULATRS TO BE FILLED IN BY THE CANDIDATE

1. Name (in block letters) Mr./ Miss/ Mrs. _____
2. Father's Name _____
3. Nationality _____ 4. Marital Status _____
5. Date of Birth (as given in Matriculation Certificate) _____
6. Registration No. _____ (if already registered)
7. Category _____
8. Permanent address _____

9. Local address _____

10. Details of Previous Examinations Passed

Examinations Passed	Name of the University	Year	Roll No.	Marks Obtained	Maximum Marks	Percentage of Marks/Grade	Subject/Papers
1. 12th (10+2)							
2. Graduation (B.A./B.Sc./B.Com./etc)							
3. Post-Graduation (M.A./M.Sc./M.Com. etc.)							
4. M.Phil							

11. Any other qualification : _____

12. Proposed topic of research _____

13. Details of previous research experience, if any _____

14. Details of publications, if any _____

15. Languages known 1. _____ 2. _____ 3. _____

16. Are you employed ? _____

If yes, write name of the institution and nature of work, i.e. Teaching or Non-teaching _____

(A certificate signed by the Head of the Institution in which the candidate is employed to the effect that the application is being submitted with his / her consent and permission, be also attached).

Yours faithfully,

Date : _____

(Signature of the Candidate)

17. Name and address of the proposed supervisor :

18. Details of the academic/research qualification/experience of the proposed supervisor (details of experience at U.G. and P.G. level to be given separately).

	Post	Institution	Details/Period in year(s) and month(s)
Academic qualification			
Teaching experience PG Level			
Teaching experience UG Level			
Post-Doctrol Research Experience			

1. CERTIFICATE OF CONSENT BY SUPERVISOR(S)/JOINT SUPERVISOR

I/We, am/are willing to act as his/her supervisor.

Dated

Signature of the Supervisor/
Joint Supervisor

2. CERTIFICATE OF ELIGIBILITY OF SUPERVISOR/JOINT SUPERVISOR

Certified that Dr. fulfils the eligibility conditions required for a supervisor as laid down under concerned clause of the Ph.D. Ordinance.

Dated

Head, Deptt. of,
M.D. University, Rohtak

3. CERTIFICATE OF ELIGIBILITY

Certified that the applicant is eligible/not eligible for Ph.D. registration.

If not eligible, give reasons _____

Date : _____

Head,
Deptt. of _____
M.D. University, Rohtak

RECOMMENDATIONS OF THE DEPARTMENTAL RESEARCH COMMITTEE

i) Recommended / Not Recommended _____

If not recommended, brief reasons are to be given _____

ii) Proposed Supervisor, Jt. Supervisor (if registration recommended) _____

iii) No. of Scholars he/she is currently supervising : _____

Date : _____

Chairman/Chairperson
Departmental Research Committee

RECOMMENDATIONS OF THE POSTGRADUATE BOARD OF STUDIES

Recommended/Not Recommended _____

If not recommended, brief reasons are to be given _____

Date : _____

Chairman/Chairperson
P. G. Board of Studies

RECOMMENDATIONS OF THE JOINT FACULTY RESEARCH BOARD (JFRB)

Recommended/Not Recommended _____

If not recommended, brief reasons are to be given _____

Date : _____

Chairman/Chairperson, JFRB,
M. D. U., Rohtak

Note : The following documents are required to be submitted along with the application.

1. Matriculation certificate along with its photocopy for verification of the date of birth.
2. Original D.M.C. of M.A./M.Sc./M.Com/M.Ed./M.Phil and Degree certificate along with their photocopies.
3. Migration certificate (in case of student coming from another University).
4. No Objection Certificate from applicant's employer, if he/she is employed.

PROFORMA FOR HALF YEARLY PROGRESS REPORT OF REGISTERED

RESEARCH SCHOLARS FOR THE PERIOD ENDING _____

PROGRESS REPORT FROM _____ TO _____

PART - 1

1. Name of Research Scholar _____
2. Father's Name _____
3. Permanent Address _____
4. Date of joining _____
5. Registration Number _____
6. Date of Ph.D. Registration _____
7. Name of the Department _____
8. Subject of studies _____
9. Topic of research as approved
by the BOS/Academic Council _____
10. Nature of Fellowship, if any _____
11. Details of leave applied for during
the period under report, if any _____
12. * Research work done during the period
under report _____
13. * Research papers published _____
14. * Any other information not covered above _____

Date : _____

(Signature of the Candidate)

* Attach separate sheets, if required, for details.

PART - II

REPORT OF THE SUPERVISOR

Conduct of the Research Scholar _____

OVERALL ASSESSMENT OF THE PROGRESS AND SPECIFIC COMMENTS OF THE SUPERVISOR

Date : _____

Signature of the Supervisor
(with full address)

PART - III

SPECIFIC RECOMMENDATIONS OF HEAD OF THE DEPARTMENT

Date : _____

Signature of Head of the Department

Counter Signature of the Dean of the Faculty