



# VINAYAKA MISSIONS UNIVERSITY, SALEM.

(Established Under Section 3 of the UGC Act 1956)

## APPLICATION FOR Ph.D(FT/PT) ADMISSION – OCTOBER – 2017

Read the Regulations Governing Doctoral Degree (Ph.D) Program before filling. Wherever a box is provided, place a tick mark ( ✓ ) inside to indicate "yes". Strike out whichever is not applicable.

1. Name (in BLOCK letters) :  
(As in PG degree Certificate)
2. Faculty of your PG Degree qualification :
3. Discipline of your PG Degree qualification:
4. Name of the University from where PG degree awarded \_\_\_\_\_
5. Programme for which applying : Ph.D (FT/PT) in \_\_\_\_\_
6. Date of Birth \_\_\_\_\_ Age :
7. Gender :  Male  Female
8. Nationality \_\_\_\_\_ :
9. Social Status OC/BC/OBC/SC/ST \_\_\_\_\_ : Caste: \_\_\_\_\_
10. Address for communication

Affix a recent  
passport size  
photograph

<p>Office ( If employed )</p> <p>Designation: _____</p> <p>Department _____</p> <p>Organization _____</p> <p>Place _____</p> <p>Dist &amp; State _____</p> <p>Pincode: _____</p>	<p>Address for communication</p> <p>-----</p> <p>-----</p> <p>-----</p> <p>Place: -----</p> <p>Dist &amp; State: -----</p> <p>Pincode: _____</p>
<p>Phone : (with STD Code): -----</p> <p>Mobile: -----</p>	<p>Phone : ( with STD Code ) -----</p> <p>Mobile: -----</p>
<p>E-Mail Id :</p>	<p>E-Mail Id:</p>

11. Mode :  Full Time  Part Time

If 'Part-Time'

a) Designation and office of work:

12. Details of current employment (if applicable)

(a) Name & Address of employer :

(b) Nature of employment : Regular / Approved Probationer / On Consolidated pay / On Contract / Visiting Faculty / Temporary / Teaching – Research Assistant

(c) Scale of pay:

(d) Date from which employed in the present post :

(Attach Certificate from the employer)

13. Academic Credits

(Enclose copies of Degree certificates and Mark Sheets duly attested. Start with the latest degree obtained).

S.No	Degree	Year of Passing	College	University	Major Discipline/ Specialization	Class Obtained	% of Marks/ Obtained CGPA	Regular Course/ Others (Specify)

14. Are you M.Phil Degree holder : Yes / No

( If yes, details with evidence)

If yes M.Phil Degree in \_\_\_\_\_

15. Are you qualified in UGC – NET/CSIR/SLET/

GATE/ teacher fellowship holder or equivalent/ : Yes / No

( If yes, details with evidence)

NET conducted by AYUSH

16. Area of Research ( Tentative) :

17. Department and college for Research :

**18. Particulars of payment of Application Fee:**

Name of the Bank & Branch	Demand Draft No	Date	Amount

Note: Application fee of Rs. 1000/- need to be drawn in favour of “VMU Ph.D a/c”, payable at Salem.

**19. Declaration by the candidate**

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 for admission to the programme irrespective of the status of my research work.

Place :

Date :

Signature of the Candidate

**20. Willingness of Supervisor:**

I am willing to supervise the Ph.D. work of the candidate

Name in CAPITALS :

Mobile No:

Designation and Department :

College of VMU where the Supervisor is working:

Signature of Supervisor :

**FOR BOTH FULL-TIME and PART-TIME PROGRAMME**

The candidate, if selected, will be relieved / permitted to undergo Full-time / Part-time research programme in the College of Vinayaka Missions University. During this period, the candidate will be permitted to be present for discussions with the Supervisor, attending course work, carrying out experimental studies, participating in Seminars/meetings and taking examinations related to the programme.

Place :

Date :

Signature of Head of the Institution  
where the candidate intends doing research

Name and Designation:  
Seal

**FOR PART-TIME PROGRAMME**

**CERTIFICATE FROM THE ORGANIZATION WHERE THE CANDIDATE IS EMPLOYED**

Certified that Mr./Mrs. \_\_\_\_\_ is employed as  
(Designation) \_\_\_\_\_ in the (Department /Division)

---

of Institution's Name & Address) \_\_\_\_\_

---

The Organization has no objection in forwarding his/her application and in pursuing Ph.D Programme at  
Vinayaka Missions University.

Place :

Date :

Signature of Head of the Institution

Name and Designation:  
Seal