



APPLICATION FOR Ph.D(FT/PT) ADMISSION

Read the Regulations Governing Doctoral Degree (Ph.D) Program before filling. Wherever a box is provided, place a tick mark (\checkmark) 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 (Discipline) :
6. Date of Birth : Age : Blood Group:
7. Gender Male Female
8. Nationality :
9. Social Status
OC/BC/OBC/OBC(NCL)/SC/ST/PWD : Caste :
(Enclosures required for if any claims)



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10. Address for communication :

Office (If employed) Designation_____	Address for communication _____
Department_____	_____
Organization_____	_____
Place_____	_____
Dist. & State_____	Place:_____
Pincode_____	Dist. & State_____
	Pincode_____
Phone (with STD Code)	Phone (with STD Code)
Mobile	Mobile
E-Mail Id:	E-Mail Id:

11. Mode : Full Time Part Time

If "Part-Time"

a) Designation and office of work : _____
n _____

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	Univer- sity	Major Discipline/ Specializa- - tion	Durati on of the Program	Class Obtained	% of Marks/ Obtained CGPA	Full time/Par time/Dis tance (Specify)

In case of foreign degrees equalance certificate is to be enclosed)

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/ : Yes / No (If yes, details with
teacher fellowship holder or evidence)
equivalent/ NET conducted
by AYUSH

16. Area of Research (Tentative) :



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17. Department and college for Research (option):



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 “**VMRF(DU) Ph.D**”, 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 if any :

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

Name in CAPITALS :

Mobile No :

Designation and Department :

email id :

College of VMRF where the

Supervisor is working :



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Signature of Supervisor :



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**FOR BOTH FULL-TIME and PART-TIME PROGRAMME
(If applicable)**

The candidate, if selected, will be relieved / permitted to undergo Full-time / Part-time research programme in the Institution Deemed to be University of Vinayaka Mission's Research Foundation. 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 : Signature of Head of the Institution
Date : 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 Research Foundation.

Place : Signature of Head of the Institution
Date : where the candidate intends doing research



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Name and Designation : Seal