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## Ph.D. Application Form

Note 1: Only one application form can be submitted per candidate.

Note 2: If you have mentioned more than one discipline, please submit a corresponding number of sets of photocopies of the completed application form with enclosures properly arranged and stapled. If you do not provide sufficient number of copies you will be considered only for the departments for which the copies are provided.

Ph.D. Programme in:										Paste passport size photograph in this space					
Registration No. (to be filled by Office)											and get it attested by Principal Head of College/ University last attended or a Gazetted Officer				
1. Name in full (as in qualifying do (Type or Write Legibly in English Keep one block)					rds)							(	do not pir	1)	
2. Father's Name (as in qualifying (Type or Write Legibly in English Keep one block)	_				rds)										
3. (a) Address for postal commun	icatio	n:*			(	(b) I	Peri	mane	nt Ac	ddres	s:				
City				_	-	——City	7								
City         City           State         Pin    State  Pin															
*It is responsibility of the candidate to intimat	te chan	ge of	addre	ess, if ar	ıy.									_	
<ul><li>4. Category under which you wan</li><li>5. Contact Details:</li></ul>	nt to a	ppl	<b>y:</b> i)	Full	Γime	9			ii)	Part	Time	9			
Telephone No. (with STD code): Mobile No.: E-mail addre									ddress	<u>.</u>					
zereprese ver (winners cone)															
Candidate must provide E-mail address or Mo	bile mu	mbei	r or bo	oth, not	fication	ons w	vill b	e sent	by ema	il and/d	or SMS.				
6. Date of Birth (as in School Leavin	ıg Cer	tific	ate):								_ (1	in DI	)/MM	/YY fo	ormat
7 CNI/OPC (NIC)/OPC/SC/ST/DC			$\neg$	0 Ca	(T)	E /T/\			0 NT-		1:4				



10. In case you have qualified or having valid score for a competitive examination like GATE, GMAT, CAT, JMET, GRE, TOEFL, UGC-NET (JRF), MET etc., give the details in the space provided below\*:

	Name of Examination		S	Score/ Percentile			Validity Period (if applicable)				
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	(A 1 '										
Exam Passed/ Appeared	of Academic Record  Branch  Subject		University/ Institute		Month & Year of Passing	С	ca separa class/ Division	% of Marks	Grade/CPI/CGPA (Please also enter equivalent percentage of marks in the		
	n/ Profession	al Expe	rience, Pa <sub>l</sub>	pers Pu	T		ach Sepa	I	t if required)  Dissertation/ Topic		

Name of University/ Institute/ Industry	Period	Position held/ Nature of duties	Name of Supervisor	Title of Dissertation/ Topic of Research/ Papers Published*

 $<sup>{</sup>f *}$  Give title of paper, name of author(s), journal name, volume, page(s), year.



<b>14. Employment Details:</b> (Attach separate sheet, if required)							
Total Duration (in months):							
Organization	Designa	gnation	Date				
			From	То			
15. Declaration: I do hereby solemnly declare to knowledge and belief. I am fully aware the certificate/ final transcripts within stipulate am also aware that providing incorrect informs of my admission at any stage.	at I must submit attested d dates, failing which m	ed copies ny admiss	of my qual	ifying degree nd canceled. I			
No. of enclosures:	_						
		signature (	nature of the Applicant				
Place:							
Date:							
Details of Demand Draft:							
Demand Draft No.:	for₹						

Date of Issue: \_\_\_\_\_\_ Bank Name: \_\_\_\_\_