## NATIONAL INSTITUTE OF TECHNOLOGY, KURUKSHETRA

(Institution of National Importance)

Sr.N	o										

#### APPLICATION FOR ADMISSION TO

## THE DOCTORATE IN PHILOSOPHY (Ph.D.) PROGRAMME IN ACADEMIC SESSION 2015-16(EVEN SEMESTER)

To The Director, National Institute of Technology, Kurukshetra Room No210, Academic Section, Golden Jubilee Administrative	Space for	
Building, Kurukshetra-136119	Photo	
Sir /Madam,		
I hereby apply for admission to the Ph.D. programme as a research scholar Department of	Institute of Technolog have read the Ordinances le by the amendments mad the Institutes/ Universitie ogramme at this Institute. Indicate to the best of mapplication is found false	y, & de s, I
PlaceYours faithful	lly	
Signature		
Dated Name (	)	
(Particulars to be filled in neatly by the Candidate)		
1. Name (in block letters) Mr./ Ms		
2. Father's Name		
3. Mother's Name		
4. Date of Birth (as given in Matriculation Certificate)		
5. Registration No. (if already registered with this Institute)		
5. Permanent Address		
7. Address for correspondence		

8. Contact Telephone/ M	obile No	•••		• • • • • • • • • • • • • • • • • • • •		•••••	
9. Category to which you	belong (state one	e of these-	- General / SC / ST	7 / PH)			
10. Academic Qualificati	ons-						
Examination Passed	Discipline/ Specialization	Full- time/ Part- time	Name of the University/ Institute	Year	Max. Marks	Marks/ Grade Obtained	%age of Marks
Bachelor's Degree							
Master's Degree							
National Test/GATE/NET etc.							
Any other Exam							
<ul><li>11. Master's programme</li><li>12. Have you ever been of punished during your</li></ul>	disqualified from	appearing					
(state Yes/No)							
If yes, Class/Examinat	ion	• • • • • • • • • • • • • • • • • • • •	Session/Yea	ır			
Name of the University	y		Punishment	awarded.			
13. Did you apply earlier full details.	r also for Ph.D. p	rogramm	e to this, or to any	y other In	stitute/ U	Jniversity?	If yes, give
14. Proposed area of rese	arch						
15. To be registered as a	Full-time, or a Pa	rt-time sc	holar?				
If part-time; are adequate	e computing, labo	ratory, ar	nd library facilities	in the pro	posed ar	ea of	
research available to you	ı in your parent In	stitute/Oı	·g?				
16. If full-time; source of	scholarship/ fina	ncial supp	port, if any				

17. Pr	oposed s	supervisor(s) & his affiliation
	• • • • • • • • • • • • • • • • • • • •	
18. De	etails of	previous research experience, if any
19. De	etails of	publications, if any (attach copies)
20 If	employe	od.
20. 11	(a)	Regular/Temporary
	(b)	Name of the employer
	(c)	Nature of work (Teaching/other)
	(d)	Total experienceyearsmonths
21. Re	emarks, i	if any
Date:		
		Signature of the applicant

**Note:** The applicant is required to submit one attested photocopy of each of the following (as applicable) Certificates/ Degrees with the application form.

- 1. Matriculation Certificate.
- 2. Bachelor's Degree Certificate and Marks Sheet.
- 3. Master's Degree Certificate and Marks Sheet.
- 4. GATE/ NET Score Card.
- 5. Scheduled Caste/ Scheduled Tribe / Physically Handicapped Certificate.
- 6. Migration certificate (in the case of a student coming from other University/ Institute).
- 7. If employed, No-Objection-cum-Service Certificate from the employer.
- 8. Nature of employment, research experience, publications and other related details.
- 9. If seeking admission to Ph.D. programme on the basis of study leave, please show a proof at the time of interview that you will be granted study leave for a minimum period of 02 years.
- 10. The eligibility shall be determined on the basis of the documents received by the last day of receiving the applications.

#### INCOMPLETE APPLICATION IS LIABLE TO BE REJECTED SUMMARILY.

- Note 1 If applying on the form downloaded from the website, please attach a DD of Rs. 200/- in the name of the Director, NIT, Kurukshetra.
- Note 2 The applications for Ph.D. can be submitted once from 1<sup>st</sup> November to 30<sup>th</sup> November w.e.f 2015-16 onwards, the last date for submission of the application may change due to administrative reasons. Please visit nitkkr.ac.in regularly for latest update in this regard..

## NO OBJECTION-CUM-SERVICE CERTIFICATE

# (CERTIFICATE TO BE SIGNED BY THE COMPETENT AUTHORITY/ HEAD OF THE INSTITUTE, IF COMPETENT)

I hereby certify that the application of Mr./	Msfor admission to
the Ph.D. programme as a full-time/ part-time scho	olar at the National Institute of Technology, Kurukshetra, is
being made with my consent and permission. He	e/ She has been serving in this Institute/ Department as
(designation)since	on basis. I also certify that the post
on which he/she is working here is a teaching/non-	-teaching post.
Mr./ Mss	shall be relieved for the period required to be spent at NIT
Kurukshetra to complete his/ her Ph.D. requirement	ts.
*Further certified that his/ her official duties permit	t him/ her to devote sufficient time for research; and that
the facilities for pursuing research in his proposed f	field of research are available at this Institute/ organization.
*For part-time applicants only	
Place	Signature of the competent authority/ Head of the Institute, if competent
Dated	Name
	Seal

<u>Note</u> - Minimum two years continuous service in sponsoring institute/org. is essential.

### PROPOSED SUPERVISOR'S CONSENT

I have read the Ph.D. Ordinances and Regulations of the Institute, and have examined this application. The applicant is eligible for Registration for Ph.D.

I hereby give my consent for supervising the Ph.D. work of the applicant

Mr./ Ms			
in the proposed research	ch area		
for which he/she is app	olying in the Deptt of		
at NIT, Kurukshetra.			
Signature			
Name		Designation	
Dept of			
	<u>FC</u>	OR OFFICE USE	
I. Certificates			
checked (point 2. For employed a	fication / Migration/ Cast out deficiency, if any)? applicants- whether no ob- tificate attached?		
3. Classification/	Category under which to	be registered	
4. Whether conse	nt of Supervisor given? (	(Yes/ No)	
-	esent case is within the p Supervisor (Yes/ No)	prescribed	
6. DRC approval	? –Yes/ No; and the date	of approval	
		Initial of DA/Supdt.	
II. Registration			
Category of scholar (fo	or the purpose of fee pay	ment)	_
Details of first fee paid	l (Rs.)	Allotted Regn No	
III. Scholarship	Eligible/ Ineligible	Scholarship amount per month- Rs.	
Signature of DA/ Sup	odt.	Deputy Registrar (Academic)	Dean (Acad