



**Rajiv Gandhi Proudyogiki Vishwavidyalaya**  
(University of Technology of Madhya Pradesh)  
Airport Bypass Road, Gandhi Nagar, Bhopal-462033  
Phone: 0755-2678833 Fax: 0755-2678834 Website: www.rgpv.ac.in

**Registration form for Ph.D. Programme**

Paste Recent Self  
attested  
Photograph

Please read the Ordinance No.11 for Ph.D. and instructions given on the Portal before you fill up the form. Tick (✓) the relevant box wherever provided. Attach attested copies of certificates/mark sheet in support of following information.

**Branch/Subject:**  
At Graduation \_\_\_\_\_  
At Post Graduation \_\_\_\_\_

Faculty Applied for : \_\_\_\_\_ Subject \_\_\_\_\_ (As per Annex. A)  
Interdisciplinary (If yes, Name other Faculty) \_\_\_\_\_ Subject \_\_\_\_\_ (As per Annex. A)  
(Fill separate forms for each Department, In case of Interdisciplinary, form should be filled in main faculty only)  
Proposed Supervisor \_\_\_\_\_ (Refer List of approved supervisor)  
Proposed co-supervisor (if any) \_\_\_\_\_ do \_\_\_\_\_  
Proposed Research Centre \_\_\_\_\_ (Refer the information at [www.rgpv.ac.in](http://www.rgpv.ac.in))  
Proposed Title of Research \_\_\_\_\_  
Proposed Research Area (Board Area) \_\_\_\_\_  
(Enclose Brief description of proposed work In 50 words) (Attach Separate Sheet)

Name (in capital) \_\_\_\_\_  
Father's/Husband's Name \_\_\_\_\_  
Gender Male  Female  Date of Birth : Date \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_  
Category : Gen  SC  ST  OBC   
Mother's Name \_\_\_\_\_  
Address for Correspondence \_\_\_\_\_  
\_\_\_\_\_  
Email ID \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
Tel No with STD Code \_\_\_\_\_ Mobile No \_\_\_\_\_  
Permanent Address \_\_\_\_\_  
Tel No. with STD Code \_\_\_\_\_

**Note:- Please fill up this form after successful completion of Ph.D. Interview**

Qualifying Exam \_\_\_\_\_ (attach copy of Degree)

Discipline \_\_\_\_\_ Duration of Course (Years) \_\_\_\_\_

Name of University /Institute \_\_\_\_\_

Year of Passing \_\_\_\_\_

CGPA/Marks obtained in qualifying degree \_\_\_\_\_ Max Marks \_\_\_\_\_ %age \_\_\_\_\_

(M.Tech./M. Pharm/MCA/M.Sc./M.Arch.)

**GATE/NET/SLET/GPAT or any other equivalent Exam passed.**

Name of Exam \_\_\_\_\_

Year of passing \_\_\_\_\_ Marks obtained \_\_\_\_\_ All India Rank \_\_\_\_\_

**Details of Marks Scored in Examination other than qualifying exam**

| Qualification   | Specialization | Univ./Inst. | Year of Passing | %Marks/CGPA | Enclo. No. |
|-----------------|----------------|-------------|-----------------|-------------|------------|
| 10+2/Equivalent |                |             |                 |             |            |
| B.Sc.           |                |             |                 |             |            |
| B.Tech./B.E.    |                |             |                 |             |            |
| B.Pharm         |                |             |                 |             |            |
| B.Arch.         |                |             |                 |             |            |
| Any Other       |                |             |                 |             |            |

**Experiences**

| Organization | Designation | From | To | Enclo. No. |
|--------------|-------------|------|----|------------|
|              |             |      |    |            |
|              |             |      |    |            |
|              |             |      |    |            |
|              |             |      |    |            |

**Names and addresses of two references those are familiar with your academic background.**

Name \_\_\_\_\_

Designation \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

Pin \_\_\_\_\_ Tel no. \_\_\_\_\_

Email ID \_\_\_\_\_

Name \_\_\_\_\_

Designation \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

Pin \_\_\_\_\_ Tel no. \_\_\_\_\_

Email ID \_\_\_\_\_

**Payment Details: (Demand Draft or Challan of ₹ 10,100/- in favor of Registrar RGPV payable at Bhopal)**

| DD Number | Bank | Date | Issued Branch |
|-----------|------|------|---------------|
|           |      |      |               |

**Declaration**

- a) I declare that all the information given by me in this application form is correct to the best of my knowledge and belief, and I understand that false or incomplete information would cause invalidation of the application.
- b) I shall abide by the decision of Rajiv Gandhi Proudyogiki Vishwavidyalaya, Bhopal in all matters pertaining to admissions in Ph.D. program. The decision on the university shall be final and binding on me.
- c) I shall abide by the rules and regulations of the university and research center.
- d) For all legal actions, suits and proceedings, the jurisdiction of court of law shall be deemed to lie exclusive at Bhopal.
- e) I have carefully read and understand ordinance 11 of the university for Ph.D. and I agreed to accept all terms, conditions and regulations.
- f) I shall abide by the rules & Regulation as per Ph.D. advertisement and subsequent notification if any.

**Signature of the Candidate**

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**N.B.:- All candidates for registration for the Ph.D. degree are requested to read carefully the ordinance for Doctor of Philosophy of RGPV and to follow the provisions of the same.**

## Recommendation by Supervisor

Recommended for acceptance of application of Mr./Ms. \_\_\_\_\_ for registration in the subject \_\_\_\_\_ under the faculty of \_\_\_\_\_. I have discussed with him/her the whole aspect of the proposed research work, found the applicant really interested in the work and the subject finalized for the research is as mentioned in the application.

If selected for registration in Ph.D. Program, I shall guide him/her in the execution of the research work/Course work and shall be sending progress report periodically every six month about actual work done as per requirement in Ordinance 11 of the University.

There are \_\_\_\_\_ candidates already registered who are working under my supervision in any of the university in India as well as abroad.

Place \_\_\_\_\_

Date \_\_\_\_\_

Signature of the Supervisor \_\_\_\_\_

Full Name \_\_\_\_\_

Designation \_\_\_\_\_

Institute /Research Centre \_\_\_\_\_

Signature of the Co-Supervisor \_\_\_\_\_

Full Name \_\_\_\_\_

Designation \_\_\_\_\_

## Forwarding Note by Research Centre

Forwarded the candidate Mr./Ms. \_\_\_\_\_ will be provided with all necessary facilities in respect of Library, Laboratory etc. from this institute/department for which it is fully equipped, if he/she is selected for registration for Doctoral degree in the subject \_\_\_\_\_, there being post graduate teaching here in the said subject.

Signature and Name of the Principal/Head of the  
Institution/Department.

Name of the College Department \_\_\_\_\_

\_\_\_\_\_  
Official Seal

Place \_\_\_\_\_

Date \_\_\_\_\_

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**N.B.:- All candidates for registration for the Ph.D. degree are requested to read carefully the Ordinance for Doctor of Philosophy of RGPV and to follow the provisions of the same.**

## UNDERTAKING

I \_\_\_\_\_ S/o, D/o \_\_\_\_\_ State that I am aware that ragging in any form is banned in RGPV and its affiliate institutions and do hereby undertake not to indulge in any form of ragging the course of my study at RGPV and its affiliated institutions.

**Date:** \_\_\_\_\_

**Place:** \_\_\_\_\_

**Signature of the Candidate**

I am aware that ragging in any form is banned in RGPV and its affiliated institutions and that I agree to abide by the punishment meted out to my ward in case he/she is found guilty of ragging.

**Date:** \_\_\_\_\_

**Place:** \_\_\_\_\_

**Signature of parent/guardian**

**(Certificate and Forwarding Note by the Employers)**

1. Name of the Employing Organisation : \_\_\_\_\_

2. Type of Organisation :    General Government        State Government      
   Government Autonomous        Organization      
   Public Sector Enterprise        Private Sector Industry      
   Private Engg. College   

3. Address of Administrative Officer/HR Manager : \_\_\_\_\_

Phone \_\_\_\_\_ Fax : \_\_\_\_\_

Email: \_\_\_\_\_

4. Designation of the employee seeking registration for Ph.D. at RGPV : \_\_\_\_\_

5. Employment Details:

a) First joined on (date) : \_\_\_\_\_

b) Holding the present: \_\_\_\_\_

Position since (date)

(c) Nature of Job: \_\_\_\_\_

(R & D, Design, Production, Marketing, Administrative, Teaching)

Certified that, Mr./Ms. \_\_\_\_\_ employed as \_\_\_\_\_  
in this organization is sponsored for admission to Full Time Ph.D Programme of RGPV, Bhopal. He/She  
has been employed in this organization for the past \_\_\_\_\_ years in a regular cadre. If selected as a  
sponsored candidate the organization has no objection to his/her undergoing three years of full time  
studies at RGPV Bhopal and its approved Ph.D. research centres.

Signature of Applicant

Signature of Competent Authority

Name, Designation

Seal

