



DEPARTMENT OF ZOOLOGY
UNIVERSITY OF DELHI
DELHI-110007 (INDIA)


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Dated: 25/01/2021

Based on the overall performance in their interview on 12th and 13th January, 2021 the following students are shortlisted for Ph.D registration for the academic year 2020-21.

S.NO.	Name of the Student	Application From	Category	Name of purposed Supervisor
1	Ananya Banerjee	20ZOOL2015120	UR	Prof. Umesh Rai
2	Ankit Yadav	20ZOOL2005508	OBC	Prof. Rina Chakrabarti
3	Binoy Sabu	20ZOOL2007373	UR	Prof. Rajagopal Raman
4	Divya Mehul	20ZOOL2007682	OBC	Prof. Rita Singh
5	Prerna Rajoria	20ZOOL2007566	OBC	Prof. S. Basu Modak
6	Sheetal Yadav	20ZOOL2005459	OBC	Prof. Ram Krishan Negi
7	Sonakshi Modeel	20ZOOL2000734	UR	Prof. Ram Krishan Negi
8	Shikha Rani	20ZOOL2003172	ST	Prof. Neeta Sehgal
9	Tanya Tripathi	20ZOOL2005626	UR	Prof. Alok Chandra Bharti
10	Gordhan Singh	20ZOOL2004700	SC	Prof. Rita Singh
11	Divya Janjua	20ZOOL2006612	SC	Prof. Alok Chandra Bharti
12	Bhupender singh	20ZOOL2004019	SC	Dr. J.S Prohit
13	Garima Nagar	20ZOOL2005575	OBC	Dr. Indrakant K.Singh
14	Himanshi	20ZOOL2000282	OBC	Dr. Rajeev Singh
15	Khushbu Wadhwa	20ZOOL2005522	EWS	Dr. Hardeep Kaur
16	Nandini Sahani	20ZOOL2008409	OBC	Dr. Monisha Khanna

The above students are required to fill the prescribed form (attached alongwith) for Ph.D admission and submit the same in the office alongwith self-attested documents for the verification latest by 02nd February, 2021. The admission will be provisional until approved by DRC and subsequently by Board of Research studies for Sciences.


Nodal Officer
Ph. D. Admission Committee


(Prof. Umesh Rai)
Head of the Department

विभागाध्यक्ष / Head
प्राणी विज्ञान विभाग / Department of Zoology
दिल्ली विश्वविद्यालय / University of Delhi
दिल्ली-110007 / Delhi-110007

BOARD OF RESEARCH STUDIES
(FACULTY OF SCIENCE)
UNIVERSITY OF DELHI

APPLICATION FORM FOR ADMISSION TO Ph.D. COURSE IN THE DEPARTMENT
OF.....

The Chairman,
(Board of Research Studies)
Faculty of Science,
University of Delhi,
Delhi-110007.

Photograph

Sir/Madam,

I hereby apply for admission as a research student for the Ph.D. Degree of the University of Delhi in the Faculty of Science.

I certify that the statements made below in columns 1 to 17 are true to the best of my knowledge and belief.

Sincerely yours

Signature of Candidate
Mobile No.

Date :

1. Name (in block Letters) Mr./Ms.
2. Present Address.....
3. Date of Birth.....
4. Nationality.....5. University Enrol. No.
6. Name of Father or Guardian.....
7. Guardian's relationship with the applicant.....
8. Name, Address (along with Tel. No. and E-mail address) and Occupation of Father/Guardian.....
.....
.....
9. Name and Address of Mother (along with Tel. No. and E-mail Address).....
.....
.....
10. Permanent Home Address.....
.....
11. Category (General/SC/ST/OBC).....
12. Educational Institutions attended and examinations passed starting with Secondary/Senior Secondary Examination.

Name of Board/ University, etc.	Examination passed	Year	Roll No.	Marks Obtained	Maximum marks	% age	Subjects offered and passed at the Exam.

NOTE : 1. Attested copies of the Secondary/Senior Secondary Examination/SSC Examination/Degree Marks Sheets for the B.Sc./M.Sc./M.Phil. Examinations and Certificates showing the date of birth must be attached with the application.

13. Nature of Fellowship : NET/Non-Net/Others (Specify).....

14. Proposed Title of Research
(IN BLOCK LETTES)

.....
.....

15. If M.Phil, whether course work completed/not completed?.....

16. Is the candidate employed in any institution? Give the name of Institution, designation and nature of the work and date of appointment of the substantive post:

.....

17. If employed, a Certificate to be provided by the Head of the Institution in which the candidate is employed that he/she would be sanctioned a leave for a period of minimum two years from the date of joining.

.....

I/we, hereby, agree to guide the applicant if he/she is admitted to the Ph.D. programme.

Name and designation of Supervisor/s
(with address indicating Deptt.)

1.....

2.....

No. of scholars already registered (Please give

Names and date of registration)

1.....

2.....

3.....

4.....

Names of members of the Advisory Committee

5.....

1.

6.....

2.

7.....

8.....

Signature of the Supervisor

Signature of Jt./Co.-Supervisor (if any)

*Signature of the Head of the Department
(with Seal)*