

**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)*