



INDIAN INSTITUTE OF TECHNOLOGY BHUBANESWAR

APPLICATION FOR ADMISSION TO Ph.D. PROGRAMME

Affix passport size recent photograph

Application Number - _____ [For office use only] Form No. _____

To be filled by the candidate

1	Full name of the Applicant (In Block Letter)												
2	Type						Institute Scholar <input type="checkbox"/>			Sponsored Scholar <input type="checkbox"/>			
3	Performance in GATE/NET												
Name of the Examination		Discipline		Year of Examination		Score/ Percentile		Validity					
								YES		NO			
4	School in which admission is sought												
5	Proposed Research Area [Broad Area Only]												
6	Name of the Father/Guardian												
7	Occupation												
Date of Birth			Place of Birth			Nationality (Please Specify) <input type="text"/>							
Day	Month	Year		Town/ Village	District	State	Marital Status - Married <input type="checkbox"/>		Unmarried <input type="checkbox"/>				
							Gender - Male <input type="checkbox"/>		Female <input type="checkbox"/>				
							Category (GEN/SC/ST/OBC/PH) (Please Specify) <input type="text"/>						
Address for correspondence						Permanent Address							
PIN: _____ email: _____						PIN: _____ email: _____							
Tele Phone No. (with STD code) (Res): _____						Tele Phone No. (with STD code) (Res): _____							
Tele Phone No. (Mob): _____						Tele Phone No. (Mob): _____							
8	Educational Qualification (Attested copies of the certificates/mark sheets to be enclosed)												
Examination Passed		University/Institute		Year		Discipline		Specialization		Division/Class		% of Marks/CGPA	
HSC(10 Level) or Equivalent													
H.S. (10+2 Level) or Equivalent													
B.Tech. or Equiv./ B.Sc./B.A./													
M.A. /M.Sc. (Engg.)/M.S./M.E. or Equiv.													
M. Tech. /M. Phil or Equiv.													
Any other													

9	Whether the Applicant is Sponsored by any organization - YES <input type="checkbox"/> No <input type="checkbox"/> (Attach Sponsorship Certificate)							
10	Experience, if any, of Service and/or research including present position held: (Attach additional sheet, if necessary)							
	Name and address of employing organization	Designation	From	To	Total period up to date	Nature of work	Salary Drawn	Remarks
11	Whether applied previously - YES <input type="checkbox"/> NO <input type="checkbox"/>							
12	Publications, if any (Attach additional sheet, if necessary)							
13	DD Amount		Name of the Bank					
	DD No		Date					
14	LIST OF ENCLOSURES (Attach additional sheet, if necessary)							
	1							
	2							
	3							
	4							
	5							
Declaration by the Applicant :								
I hereby declare that all the particulars furnished are correct. I am aware that any incorrect information may lead to cancellation of my admission/selection. If selected for admission, I promise to abide by the rules and regulations of the Institute.								
Date								
Place		Signature of Applicant in full						

Useful information for filling up the form

1. Separate Application form should be used for each School.
2. Enclose all necessary copies of all certificates (both sides).
3. A Self-address bearing postage stamped envelop of 28 cm x 12 cm size should be enclosed.
4. Tick (v) the relevant box wherever provided.
5. Application incomplete in any respect is liable to be rejected.
6. Candidates who are in the final year of their qualifying examination can be considered for admission only if they complete all the requirements of their final examination before the registration date.

For Office Use Only

- The candidate may be called for Interview.
- The candidate is not suitable for admission to Ph.D.
- The candidate may be admitted in Ph.D. Programme.

Signature of Head of School