

APPLICATION NO:

**ALAGAPPA UNIVERSITY, KARAIKUDI—630003**

(A State University Reaccredited with 'A' Grade by NAAC)

**APPLICATION FOR REGISTRATION FOR THE DEGREE OF  
DOCTOR OF PHILOSOPHY (Ph.D.)**

Please Tick ( ✓ ) FULL – TIME  PART – TIME

**Note: Please ensure your application is complete in every respect. Otherwise it will not be considered.**

1. Name of the subject in which :  
the candidate desires to pursue research ( Refer  
Ph.D. Regulations)

2. Name of the applicant (Block Letters) :  
as entered in the qualifying PG educational  
records)

Affix passport  
size photo  
(To be attested  
by the Research  
Supervisor)

3. Date of Birth (DoB) :  
(Please attach attested copy of Certificate of TC/  
School Leaving Certificate for Proof of DoB)

D	D	M	M	Y	Y	Y	Y

4. Gender : Male / Female

5. Place of Birth Village/Town Taluk :  
District : State :

6. Father's/ Husband's/Guardian's Name :

7. (a) Nationality: (b) Religion :

8. Name of the Community (Please Tick ✓ ) :  
(Please attach Attested copy in case of non-OC  
Candidates)

OC	BC	BCM	MBC	DNC	SC	SC(A)	ST

9. Address for Communication : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
PIN \_\_\_\_\_

Email id :

Mobile : Phone (LL) \_\_\_\_\_

**10. ELIGIBILITY REQUIREMENTS:****(A) Academic Qualifications Passed from UG onwards**

Sl. No.	Examinations passed	Name of College / University	Register Number	Month & Year of passing	Discipline/ Major Subject	Class / Grade/ Marks %

(Please **attach original P.G./ M.Phil Certificates /Diplomas etc.** without which application will be rejected)

**(B) Details of National and State level Examinations / Entrance Examination Passed.**

(Candidates should have passed any one of the following Examination)

Name of the Examination passed	Registration No.	Month & Year of Passing
NET /SET/GATE		
Pre-Registration Qualifying Entrance Examination for Ph.D. conducted by Alagappa University		

**(Please attach attested copy of the certificate)**

11. Name of the University Department / Constituent College / Approved Research Centre where the candidate proposes to do research :

12. a) Broad field of proposed research work :

b) Title of Research Proposal :  
(IN BLOCK LETTERS)  
(This has to be the title of the thesis, unless changed adopting due procedure)

c) State whether the Research work is inter -disciplinary. : 

Yes	<input type="checkbox"/>
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No	<input type="checkbox"/>
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d) If 'Yes' mention your (i) Prime Discipline : 


(ii) Co-Discipline :

NOTE: Research proposal (not exceeding 500 words) of the proposed research work (Covering Scope, Latest Review, Objectives, Methodology to be employed, Data Requirements, Tools of Data Collection, Sampling, if any, Tools of Data Analysis, Possible outcome of the proposed research proposal etc.) should be enclosed together with the Signature of the Supervisor and / or Co-Supervisor on the last page of the proposal.

**13. Teaching / Research / Professional experience in the proposed research area:**

Sl. No.	Name of the Institution	Designation	Period		Area of Specialization
			From	To	

(Please attach **original Experience certificate and NOC** obtained from the Employer)

14. Particulars of research work if any previously :  
done by the candidate

a) Whether the candidate has already registered for the M.Phil./Ph.D Degree in this University or at any other University? If so, give details (Please Tick)

Research Work	Alagappa University	Other Institution
M. Phil.,		
Ph.D.		

b) Date of Registration :

c) Title of the thesis :

d) Name and address of the erstwhile Supervisor with designation

Name of the erstwhile Supervisor	Address of the erstwhile Supervisor

e) Reason for fresh Registration :

15. Whether the candidate is at present undergoing any other program of study in this University / in any other University leading to any degree or certificate or diploma?. If so, give details. :

16. Whether candidate is sponsored by any Agency?:  
If so, Name and Address of the Sponsor.

17. A) For candidates proposing to do research under a recognized Internal Research Supervisor (Working in the University Department / Constituent Colleges / Centres /Approved Research Centre of Affiliated Colleges)

i) Name and Designation of Supervisor :

ii) Serving Institution of the Supervisor :

(iii) Date of joining the Institution :

(iv) Date of superannuation :

v) Signature of the Supervisor :

B) i) Name and Designation of Co-Supervisor :  
(If applicable)

ii) Serving Institution of the Co-Supervisor :

(iii) Date of joining the Institution :

(iv) Date of superannuation :

iv) Signature of the Co-Supervisor :

**(TO BE FILLED IN BY THE SUPERVISOR)**

**Ph.D., RESEARCH SCHOLARS OF THIS UNIVERSITY WORKING UNDER THE SUPERVISOR:**

Sl. No.	Name of the Candidate	Full Time / Part Time	Regn. No. and Date of Registration
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

Total number Ph.D. scholars working under the Supervisor

Full – Time	Part - Time

**Fee Particulars: DD favouring “The Registrar, Alagappa University” payable at Karaikudi**

<b>DD Number /Date</b> :	<b>Name of the Bank</b> :
<b>DD Amount</b> :	

18. Enclosures : The following Certificates should be enclosed

- A) **Original Certificates** (Statement of Marks and Provisional/Degree certificates for P.G. and M. Phil., Service Certificate, No Objection Certificate from present employer)
- B) **Attested copy** of Community Certificate & Transfer Certificate
- C) Research Proposal approved by the Department Research Committee

*(Please enlist the Original Certificates enclosed)*

(i)

(ii)

(iii)

(iv)

(v)

(vi)

(vii)

SIGNATURE OF THE CANDIDATE

PLACE :

DATE :

SIGNATURE OF THE RESEARCH SUPERVISOR  
WITH OFFICE SEAL

SIGNATURE OF THE PRINCIPAL / HEAD OF  
THE INSTITUTION FORWARDING THE  
APPLICATION WITH DATE WHERE THE  
CANDIDATE IS WORKING  
(WITH OFFICE SEAL)

SIGNATURE OF THE HEAD OF THE  
COLLEGE /INSTITUTION / HEAD OF THE  
DEPARTMENT OF THIS UNIVERSITY  
WHERE THE CANDIDATE PROPOSES TO  
CONDUCT RESEARCH.