



Application No:

INDIAN INSTITUTE OF PETROLEUM & ENERGY VISAKHAPATNAM

APPLICATION FOR ADMISSION TO Ph.D. PROGRAM

IN THE SEMESTER:
SESSION:

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photograph

Please read the instructions given in the brochure carefully before filling up the Application form

In case you are desirous of being considered for admission in more than one Dept. / Centre/ School, you should send separate application forms for each department with necessary documents.

1. Assistantship/Scholarship Category :

Regular with Assistantship	Sponsored	QIP	Individual Fellowship
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2. In the Department / Center / School:

3. Proposed Research Area: (a)..... (b)..... (c).....

4. NAME OF THE APPLICANT (in block capitals):

5. Date of Birth: 6. Nationality:

7. Complete postal address: **Present** Complete postal address: **Parmanent**

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.....PIN..... PIN.....

8. E-mail address:..... 9. Mobile No:.....

10. Name of Father / Guardian:..... 11. Occupation:.....

12. Details of academic record starting from Class 10th Examination: -

(Attested copies of the mark sheets/certificates to be enclosed)

Examination Passed	Year	Name of University / Institute	Percentage of aggregate marks/CGPA obtained	Class placed in	Branch /Subjects studied

13. Category (Attach attested copy of certificate if you belong to reserved category):

General OBC(NCL) ST SC EWS PwD (Please tick in appropriate box)

14. Performance in GATE / CSIR-UGC NET

Name of the Examination	Discipline	Year of Examination	Marks Obtained	Qualifying Marks	Score percentile	AIR

15. Experience of service and/or research including present position held (if any):

Name and address of employing organization	Year Joining	Total period up to date	Designation held	Nature of work*	Salary Drawn	Remarks

* Please attach additional sheet to describe the nature of your work, academic/project actives, if any.

16. Did you apply previously? : YES / NO

If YES give details :

17. Publication, if any (enclose a separate sheet) :

18. (a) Whether the applicant is sponsored by any organization? YES / NO

(Not under QIP Scheme)

(b) If "YES" the name and address of sponsoring Organization :
(Sponsorship letter by Company/Organization need to be attached)

(c) Consent of the Competent Authority Sponsoring the candidate

Signature with date :

Designation :

Office Seal :

19. Payment Reference No/ DD Information:

20. Declaration of the Applicant:

If hereby declare that all the particulars furnished are correct. I understand that my association direct or indirect with any unlawful organization is forbidden. 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:

Signature of candidate in full

FOR OFFICE USE ONLY

Registration No:

Certified that all original certificates in support of the above particulars have been verified. Admission of the candidate in the Department / Center / School has been / has not been recommended by the Admission Committee taking into consideration all prescribed requirements.

Signature of the Head of the Department / Centre / School