

Registration No.:

No. :

**INDIAN INSTITUTE OF TECHNOLOGY
KHARAGPUR – 721 302**



**APPLICATION FOR ADMISSION TO
Ph.D. PROGRAMME**

Affix here an attested passport size recent photograph

IN THE SEMESTER SESSION

1. Category

Regular with Assistantship	Sponsored
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2. in the Department/Centre/School: _____

3. If interested to apply for admission in more than one Dept./ Centre/School, 2 additional choice of Deptts./Centres/Schools in order of Preference :

(i) _____

(ii) _____

4. **NAME OF THE APPLICANT** (In block capitals) _____

5. Complete postal address : **Present** _____

_____ PIN _____ TELEPHONE NO. _____

Permanent _____

_____ PIN _____ TELEPHONE NO. _____

E-mail address: _____

6. Details of academic record starting from **HIGHER SECONDARY** 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

N. B. : In case you are desirous of being considered for admission in more than one Dept./Centre/School, you should make all entries in the form in **BLACK INK**, get additional copies for such Deptts./Centres/Schools Xeroxed and send them together with the original in one cover. Please note that only Xeroxed copies of application without the original form shall not be entertained.

7. Whether SC/ST/OBC/PH? : **YES / NO**
(Attested copy of certificate to be furnished)

8. Performance in **GATE / NET** :

Name of the Examination	Discipline	Year of Examination	Score percentile

9. Date of Birth _____ 10. Nationality _____

11. Experience, if any, of Service and/or research including **present position held**:

Name and address of employing organization	Year of 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 activities, if any.

12. Did you apply previously? **YES / NO**

If YES give details: _____

13. Publication, if any: _____

14. Name of Father/Guardian: _____

15. Occupation: _____

16. Whether the applicant is sponsored by any organization? **YES / NO**
(Not under QIP Scheme)

17. If **“YES”** the name and address of sponsoring Organization _____

18. Consent of the Competent Authority
Sponsoring the candidate _____

Signature with date _____

Designation _____

Office Seal _____

19. **Declaration of the Applicant:**

I 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

Certified that all original certificates in support of the above particulars have been verified. Admission of the candidate in the Department/Centre/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