



J. C. Bose University of Science and Technology, YMCA, Faridabad

(Established by Haryana State Legislative Act No. 21 of 2009 & Recognized by UGC Act 1956 u/s 22)

Accredited 'A' Grade by NAAC

Ph.D. PROGRAM REGISTRATION FORM						
R&D Registration Diary No.:					
(To be filled by R&D Sec.)					
Ph.D. Program Code					
1.	Name (in Block Letter)	:				
2.	Roll No.	:				
3.	Gender (✓ as applicable)	:	Male <input type="checkbox"/>	Female <input type="checkbox"/>	PASSPORT SIZE RECENT PHOTOGRAPH	
4.	Faculty	:				
5.	Department	:				
6.	Date of Joining (DD/MM/YY)	:				
7.	Date of Registration (DD/MM/YY)	:				
8.	Name of Main Supervisor (Prof./Dr.)	:				
9.	Nature of Scholar (✓ which is applicable)	:	URS <input type="checkbox"/>	CSIR <input type="checkbox"/>		UGC <input type="checkbox"/>
10. PERSONAL DETAILS OF RESEARCH SCHOLAR						
a. Date of Birth (DD/MM/YY)		:				
b. Father's /Husband's Name		:				
c. Address for Communication		:	Correspondence	Permanent		
			PIN-	PIN-		
d. Phone No.		:	(1)	(2)		
e. E-mail Address		:	(1)	(2)		
11. DETAILS OF PROPOSED RESEARCH						
a. Broad Area of Research		:				
b. Proposed Thesis Title		:				
12. PRE-PH.D. COURSE WORK DETAILS						
A.	Course Code	Name of Course	Credits Points of Course	Result/Grade		
(i)						
(ii)						
(iii)						
(iv)						



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B.	Online/MOOC (Conducted by a recognized Institution/University such as NPTEL)		
	Course Title	:	
	Credits	:	
	Duration (Total Hrs. & Weeks)	:	
	Name(s) of the coordinator(s)	:	
	Name of the Inst. /Organization conducting the course	:	
	Total Credits and CGPA/Grade (A & B)	:	
Date:		(Signature of the Scholar)	
Place:			



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CONSENT & UNDERTAKING OF SUPERVISOR(S)

- **Consent:** I/We hereby, agree to supervise the above candidate for his/her Ph.D. research work.
- **Undertaking:** I/we hereby, abide by the following guidelines on the maximum number of scholars to be supervised at a time- Assistant Professor: 4 Research Scholars, Associate Professor: 6 Research Scholars, Professor: 8 Research Scholars as laid down in the ordinance of the University. Furthermore, I/we also state that I/we have a clear vacancy, at present, for this scholar.

Prospective supervisor(s) are required to put their signature(s) as consent and undertaking as given below. In case if any supervisor(s) **is/are not recognized –he/she is also required to fill the supervisors' recognition form.**

1. THESIS SUPERVISOR(S)

a. Supervisor

Name	:		(Signature with date)
Designation	:		
Department	:		
Institution	:		

b. Co-Supervisor (If applicable)

Name	:		(Signature with date)
Designation	:		
Department	:		
Institution	:		

RESEARCH ADVISORY COMMITTEE (RAC)

As approved, a Research Advisory Committee (RAC) must be constituted for each Ph.D. Scholar. The proposed constitution of the committee with minimum three members (**not** exceeding **five** members) is as follows:

- One expert in the field from the Department/Centre,
- One faculty expert, preferably in the concerned area, either from outside the Department/Centre to which the student belongs or a different university; and
- Supervisor (s).

[For (a) and (b): Each member having -i) Total work experience of minimum five years, ii) Post PhD experience of minimum three years]

RAC must have at least one Professor, External members may be opted satisfying above criteria. Supervisor experience will be considered as per Ph.D. Ordinance.

The Research Supervisor of the scholar shall be the Convener of this Committee.



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2. CONSTITUTION OF RAC FOR THE SCHOLAR			
Sr. No.	Member Name	Designation	Affiliation
I.			
II.			
III.			
IV.			
V.			
3. APPROVAL OF RAC FOR REGISTRATION			
a.	Name of Scholar	:	
b.	Enrollment No./Roll No.	:	
c.	Date of RAC Meeting (DD/MM/YYYY)	:	
d.	*Recommendation of RAC for Provisional Registration of the scholar for PhD Recommended <input type="checkbox"/> Rejected <input type="checkbox"/>		
e.	RAC Report Enclosed: Yes <input type="checkbox"/> No <input type="checkbox"/>		
f.	Remarks (if any)		

	(Signature of RAC Member 1)	(Signature of RAC Member 2)	(Signature of RAC Member 3)
*The Approval/Rejection of RAC is to be supported by minutes of RAC meeting and attach duly filled RAC Form.			
Forwarded by:		Dean/Chairperson Concerned Department/Faculty	
----- (For R&D Section use only)			
Research Coordinator (R&D)			
Dy. Dean (R&D)			
Dean (R&D)			