

NOTE: Please read prospectus carefully before filling the application. Incomplete application with-out required enclosures as prescribed in the prospectus will be liable for rejection.

APPLICATION SERIAL NO : _____



**SRI VENKATESWARA INSTITUTE OF
MEDICAL SCIENCES, TIRUPATI – 517 507**
(A University established under the act of A.P State Legislature)

APPLICATION FOR ADMISSION INTO Ph.D PROGRAMME – 2017

Signature of the Candidate

Affix Recent
passport size
Photograph

I hereby certify that the candidate has signed before me

Signature of the Gazetted Officer with Office seal

Particulars of Payment of Application Fee :

For OC/BC candidates Rs. 1,500/-, and for SC/ST Rs. 1,000/-

D.D.No.	Name of the Bank	Date	Amount

Last date for receipt of filled in application 30 /06/2017

1.Name of the Applicant (In capital letters) :

SURNAME	NAME

2. Date of Birth :

Day	Month	Year

3. Place of Birth : _____

Age: _____

4. Identification Marks 1.
(as per SSC):

2.

5. Father's Name :

6. Mother's Name :

7. Occupation of the parents/spouse:

8. a) Nationality: _____ **b) Religion** _____ **c) Caste** _____

9. Social Status : Please tick appropriate box (enclose copy of the certificate)

OC	BC					SC	ST
	A	B	C	D	E		

10. a) sex (Tick): M/F **b) Marital Status (Tick):** Single/Married

11. Address for communication :

Contact Phone:	_____
STD Code:	_____
<input type="text"/>	_____
Phone:	_____
<input type="text"/>	_____
Mobile:	_____
<input type="text"/>	_____

12. Permanent Address:

13. Details of Fellowship/UGC/CSIR-NET/GATE/Inspire/M.Phil. passed (if any) :

14. Details of PhD program

- A. Faculty under which the candidate wants to register (tick) :
 Medical / Paramedical / Allied Health Sciences (BI&BT)
- B. Category : Part time / Full time
- C. Department under which the candidate wants to register:

15. Academic Record :

List serially, the particulars of all examinations passed from Matriculation/Higher Secondary onwards and enclose attested copies of certificates/degrees for each of the examinations passed and mark sheets for Graduate and Post Graduate University examinations passed.

Sl. No	Examination	Year of study		Name of the School/College /University	Subjects	Division/ grade	Percentage of marks
		From	To				
1	SSC						
2	Intermediate						
3	B.Sc.						
4	M.Sc						
5	M.B.B.S.						
6	M.D./M.S						
7	Any other examination passed						

State the Medals, Scholarships, Prizes and any other Award, Distinction or Honour won during your University career.

16. Career At A Glance:

List all appointments held in chronological order up to the present one:

Post held	Name of employer	Place	Period		Nature of duty	Special remarks (if any)
			From	To		

17. Details of research publications and presentations in national/ international conferences:**18. Particulars of Research Work on which the candidate desires to work:**

a. Proposed area of the Research work

b. The proposed area of research will require working in the following area
(tick those applicable)

Clinical Experimental Animal experiments Field work

c. Name and Designation of the Guide under whom the candidate wants to register:

19. Whether at present candidate is getting any research fellowship / grant /scholarship, if yes details

20. Whether all the documents listed in Annexure – I enclosed or not

DECLARATION BY THE CANDIDATE

I hereby declare that all statements made in this application are true, complete and correct to the best of my knowledge. I understand that in the event of any information being found false or incorrect, my candidature for PhD degree may be liable to be cancelled by the University. I have gone through the PhD regulations of SVIMS and if selected, I agree to abide by them. I am prepared to present myself for interview at my own expenses, if called upon to do so.

Place :

Date :

Signature of the candidate

REMARKS OF THE CHIEF GUIDE

I give my consent to provide guidance to _____,
on the proposed area of research _____
_____ I certify that I am a
recognized guide of SVIMS university and have _____ research
scholar(s) pursuing Ph.D. Program under me as on to-day.

Place:

Date:

Signature

Name & Seal of Chief Guide

Eminent faculty in the cadre of Professors and above working post retirement on adhoc basis to be act as Chief guide shall provide the following as per clause 6 (a) of PhD regulations, 2011.

*Dr. _____ Designation _____, in the Dept. of _____
_____ is working on full time basis is identified as Co-guide.*

Signature of the Chief Guide

*I give my consent to act as co-guide for the candidate namely _____
_____ to be registered under the guidance of the Chief
guide Dr. _____*

Signature of the Co-guide

NO OBJECTION CERTIFICATE (FORM – A)

(For the candidates working on adhoc/daily wage/contract basis of SVIMS only)

This is to certify that, _____ is a teaching faculty working in the Dept. of _____ on adhoc basis/ daily wage / contract basis since _____. His/her character are satisfactory. I have no objection for admitting him/her in to PhD course, as full time candidate if selected. I also certify that no extra manpower is required because of this.

Signature of the HOD
with seal

UNDERTAKING BY THE CANDIDATE (FORM – B)

(For the candidates working on adhoc/daily wage/contract basis of SVIMS only)

This is to certify that, I _____ working as a teaching faculty in the Dept. of _____ on adhoc basis/ daily wage / contract basis since _____ will not claim any extension of the tenure of the post or any other benefit whatsoever, linking the claim to my registration and pursuance of PhD programme.

Signature of the candidate

NO OBJECTION CERTIFICATE (FORM – C)

(For In-service candidates of SVIMS only)

This is to certify that _____ is an employee working in this Institution as _____. As per the service register he/she has a continuous service of _____ years and _____ months as on today.

I hereby certify that he/she has been actively involved in regular teaching & research activities of the department during the last two years and his/her conduct and character are satisfactory. I recommend his/her application for admission in to PhD course as part time candidate.

I hereby certify that the work of the department will not suffer and no additional staff will be asked in lieu of _____ undertaking PhD programme.

Signature of the HOD
with seal

Approved / Not approved
Director, SVIMS

UNDERTAKING BY THE CANDIDATE (FORM – D)

(To be submitted by the candidate who is in service faculty of SVIMS pursuing PhD programme under part time category)

I, working as
..... in the department of Since
....., hereby agree to comply with all the assignments given to me
while pursuing the PhD programme.

I am aware that I have to work in SVIMS for a minimum period of 3 years after the award of PhD degree.

Further, I will not request the Institution to support financially for my research work.

Signature Of The Candidate

Annexure

List of documents to be enclosed along with the application from

1. SSC certificate
2. Graduate degree Certificate
3. Post –graduate degree marks card
4. Post –graduate degree Certificate
5. Caste certificate (if any)
6. No Objection certificate from Head of the department/college where he / she is employed
7. Photograph of the candidate
8. Proof of address
9. Study certificates from Inter to Post Graduation. Proof of having studied PG on regular basis.
10. Certificate of Fellowship/UGC/CSIR-NET/GATE/Inspire/M.Phil. passed (if any)
11. Copy of provisional selection of fellowship JRF/SRF (if any)

Note: Attach only attested photocopies of certificates.

Produce the originals at the time of Interview.