

Application Form For Recognition of Ph. D. (Research) Guide



Sardar Patel University
Vallabh Vidyanagar – 388 120
Dist. Anand. GUJARAT (INDIA)
Website : www.spuvvn.edu

NAAC Re-Accreditation CGPA 2.83 Grade – “B” (16-9-2011 to 15-9-2016)

SARDAR PATEL UNIVERSITY

Vallabh Vidyanagar – 388120

GENERAL INSTRUCTIONS TO FILL UP APPLICATION FORM FOR RECOGNITION OF PH.D. GUIDE

- (1) The candidates must read the conditions of eligibility as given in Ph. D. RPG www.spuvvn.edu/academic_programs/phd and must satisfy themselves regarding their eligibility for the recognition before filling the application form.
- (2) Candidates who are desirous of applying for recognition in more than one subject will have to submit separate prescribed application form for each subject with separate application Fee.
- (3) The Application Fee Rs. 25/- + Application Processing Fee Rs 500/- = Rs 525/- can be remitted through **Cash** (During office hours Only, Except Second & Fourth Saturday of the month, All Sundays & Holliday) or **Demand Draft** in favor of the **“Registrar, Sardar Patel University”** drawn in any Nationalized Bank payable at Vallabh Vidyanagar. Write your Name, Address, and Mobile/Telephone Number on the back of the Demand Draft. **The Application Form Fee will not refunded.**
- (4) Last date of Application: 03/12/2016
- (5) Applications received after the last date will not be accepted/entertained. University will not be responsible for any postal delays/loss. Late and defective applications will be summarily rejected and no further correspondence will be entertained in this regard.
- (6) This application is valid only for academic year 2016-2017. There is no provision for reevaluation and reassessment of application once rejected (not recommended) by committee.
- (7) Applicant is requested to enclose the attachment (documents) as per serial number mentioned in the application.
- (8) Attachment of **sr. no. 09** of application is mandatory and it should be as per prescribed performa.
- (9) Application will not be considered solely on the basis of satisfying the criteria for recognition because the committee concerned for recommending recognition may use its discretion in making its recommendation.
- (10) Application form must be complete in all respects as per the format. All incomplete (lake of supporting documents, marksheet, Appoint letter, Experience letter, Publication proof, University teacher approval) application forms will be rejected.
- (11) Applications submitted on any other format (including old format) will not be accepted.
- (12) The applicants in their own interest are requested to retain a photocopy of the Application Form, Fee Receipt and Demand draft for record.
- (13) The decision of the Honorable Vice-Chancellor shall be final on any dispute
- (14) The Application form duly completed in all respect should be sent before last date of receipt of application form on the following address:
The Assistant Registrar,
Academic Section,
Sardar Patel University
Vallabh Vidyanagar – 388 120
Dist. Anand, Gujarat (India).



SARDAR PATEL UNIVERSITY
VALLABH VIDYANAGAR

No. _____
Fee: Rs. 525*
Code No.: 10105

**APPLICATION FORM FOR
RECOGNITION OF PH.D. GUIDE**

Instructions:-

- (1) Please read all the general instructions carefully before filling up the Application form.
- (2) This application form is valid for one time i. e. Academic year 2016-2017.
- (3) Applications received after the last date will not be entertained / accepted. University will not be responsible for any postal delays/loss.
- (4) Please refer the latest rules for recognition of Teacher as a Ph.D. Guide before filling the application form, on university web site: http://www.spuvvn.edu/academic_programs/phd
- (5) *The Application Fee Rs. 25/-+ Application Processing Fee Rs 500/- = Rs 525/- can be remitted through **Cash** (During office hours Only, Except Second & Fourth Saturday of the month, All Sundays & Holliday) or **Demand Draft** in favor of the **“Registrar, Sardar Patel University”** drawn in any Nationalized Bank payable at Vallabh Vidyanagar. Write your Name, Address, and Mobile/Telephone Number on the back of the Demand Draft. **The Application Form Fee will not refunded.**

Particulars of the subject for which Ph.D. Guide recognition is sought;

Subject: _____ **Branch of Subject:** _____

PARTICULARS OF TEACHER (APPLICANT)

1. Name in full _____
2. Designation _____
3. Name of the College/Department of the University _____
4. Address (Office) _____
Address (Residential) _____

- Mobile No.: _____ Land Line No. _____
- E-mail: _____

5. **Qualifications: (Please attach all the mark sheets & relevant certificates.)**

Name of Degree	Class/ Percentage	Month & Year of Passing	Name of the University/ College	Principal/Major Subject

6. (A) *Teaching experience at Post-graduate level as full time teacher (Please furnish relevant proof):

* (Note: By teaching, it is meant teaching of the subject for which recognition is sought.)

Name of University Department/College	Designation	Period of teaching		Total Experience	
		From	To	Years	Months

(B) *Teaching experience at Graduate level as full time teacher (Please furnish relevant proof):

* (Note: By teaching, it is meant teaching of the subject for which recognition is sought.)

Name of College	Name of the subject/ Courses taught	Period of teaching in the final year degree class		Total experience	
		From	To	Years	Months

7. Academic activities and advanced study: (Please give details on a separate sheet)

(i) Published work (Numbers Only):

(1) Books

Before Ph.D.: After Ph.D.:

(2) Research publications / articles in standard refereed journals

Before Ph.D.: After Ph.D.:

(ii) Lectures delivered before academic societies, in colleges, in postgraduate departments and before similar bodies.

(iii) Refresher/Advanced courses attended in the subject concerned.

(iv) Details of participation in National/International Seminars/Conferences/Symposia/Workshop.

(Mere participation in the above OR presentation of a paper in the above shall not be considered as publication)

8. **Research Experience:** *(Please provide details for the period after the Ph.D. award)*

Name of the Institution	Position	Type of work Done	From	To	Total Period	
					Years	Months

Title of the Ph.D. Thesis:

Date of Notification/Awarding of Ph. D. degree: _____

Name of University: _____

***(Please attach Photocopy of title page)**

9. **Details of Research Publications with photo copies or reprints:**

1. **Please make an index on a separate sheet showing the title of the paper, name of the journal, month and year of publication and place of publication with ISBN,ISSN No.**
2. **Attach photocopy of Front Page and Index of Journal for Reference.**
3. **Please note that conference abstracts/paper presentations are not considered as research publications.**

10. Approval of appointments as a teacher from University : Letter No. _____ & Date _____ (Please attach copies of the proof for all appointment)

I have read and understood the rules and general instruction given in application form, and I hereby declare that the information provided in this application form are correct to the best of my knowledge and understating. In case of any information furnished by me is found to be incorrect and/or to be not in compliance to the rules of University, the University has the right to take any action it deems fit, including the derecognition of guideship at any point of time. I promise to abide by the rules and regulation of the University in force from time to time.

Place

Date:

Signature of Teacher (Applicant): _____

Certified that (i) The applicant is a full time teacher in the department/institute/college from _____ To _____.

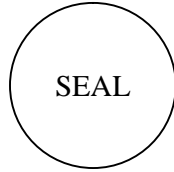
- (ii) The applicant fulfills the minimum eligibility for the recognition sought as per the latest rules for the same. (Please refer the copy on www.spuvvn.edu/academic_programs/phd)

- (iii) The applicant does not fulfill the minimum eligibility for the recognition sought as per the latest rules.
- (iv) The candidate has submitted all the attested documents in support of his Educational qualifications, teaching experience, academic activities, research experience and Publications etc.

(Please strike out whichever is not applicable)

Date:

Place:



**Signature of the Head of the
 University Department/
 Principal of the College/
 Director of Institute**

OFFICE USE ONLY

Remarks and recommendation of the committee members (Compulsory for further consideration)

- (1) The candidate fulfills the eligibility as per the latest rules and hence is recommended for recognition as Ph.D. guide.
- (2) The candidate is not recommended for recognition because of the
 - i) Lack of necessary teaching experience as per latest rules.
 - ii) Does not have required published papers as per latest rules.
 - iii) Any other (Please specify).

Sr. No.	Name of Committee Members		Signature of committee members
1		(Convener)	
2		(Dean)	
3		(Expert)	
4		(Member)	
5		(Member)	
6		(Member)	

Date: