

**DEFENCE INSTITUTE OF ADVANCED TECHNOLOGY**  
(Deemed University)



**APPLICATION FORM FOR ADMISSION TO  
Ph.D. PROGRAMME, JAN-2019 (DRDO SPONSORED)**

Name of Department for PhD Programme : \_\_\_\_\_

<p><b>1. Name</b> : _____</p> <p><b>Date of Birth (DD/MM/YY)</b> : _____ <b>Age</b> : _____</p> <p><b>Address for Communication:</b> _____ <b>Permanent Address:</b> _____</p> <p>_____</p> <p>_____</p> <p><b>Pin code</b> : _____ <b>Pin code</b> : _____</p> <p><b>Phone No</b> : _____ <b>Phone No</b> : _____</p> <p><b>E-Mail</b> : _____ <b>Fax No</b> : _____</p>	Photo																																										
<p><b>2. Type of Registration :</b> Staff <input type="checkbox"/></p>																																											
<p><b>3. Details of University / Institution Studied (SSC, HSC and above)</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th></th><th style="text-align: center;">Degree</th><th style="text-align: center;">Discipline</th><th style="text-align: center;">University/ College</th><th style="text-align: center;">Year</th><th style="text-align: center;">Average Marks/CGPA</th><th style="text-align: center;">Class</th></tr></thead><tbody><tr><td>(a)</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr><tr><td>(b)</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr><tr><td>(c)</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr><tr><td>(d)</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr><tr><td>(e)</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr></tbody></table>			Degree	Discipline	University/ College	Year	Average Marks/CGPA	Class	(a)	_____	_____	_____	_____	_____	_____	(b)	_____	_____	_____	_____	_____	_____	(c)	_____	_____	_____	_____	_____	_____	(d)	_____	_____	_____	_____	_____	_____	(e)	_____	_____	_____	_____	_____	_____
	Degree	Discipline	University/ College	Year	Average Marks/CGPA	Class																																					
(a)	_____	_____	_____	_____	_____	_____																																					
(b)	_____	_____	_____	_____	_____	_____																																					
(c)	_____	_____	_____	_____	_____	_____																																					
(d)	_____	_____	_____	_____	_____	_____																																					
(e)	_____	_____	_____	_____	_____	_____																																					
<p><b>4. Additional Qualifying Examination</b></p> <p style="text-align: right;">GATE Score : _____</p> <p style="text-align: right;">Valid up to : _____</p>																																											

**5. Professional Experience (Technology/ Research/ Industrial) if any :**

Name of Organisation	Designation	Period		Nature of Work
		From	To	
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**6. Personal Information :**

- |  |         |  |                   |
|--|---------|--|-------------------|
| (a) Father's /<br>Husband's Name       | : _____ | (g) Martial Status   | : _____           |
| (b) Father's / Husband's<br>Occupation | : _____ | (h) Gender   | : Male/ Female    |
| (c) Mother's Name                      | : _____ | (i) Whether OBC/ SC/ST                                       | : <b>Yes / No</b> |
| (d) Place of Birth                     | : _____ | (j) (If yes, enclose attested copy of certificate<br>Issued) |                   |
| (e) Mother Tongue                      | : _____ | (k) Whether Physically challenged : <b>Yes / No</b>          |                   |
| (f) Nationality                        | : _____ | (l) (If yes, furnish the certificate to this effect)         |                   |
|  |         | (m) Domicile   |                   |

**7. Proposal title of research work**

(Please attach a small write up next exceeding one page)

**8. DECLARATION**

I hereby declare that I have carefully read the instruction and particulars supplied to me and that the entries made in the application form are correct to the best of my knowledge and belief. I understand that association (active or passive) with any unlawful organization is forbidden. If selected for admission, I promise to abide by the rules and discipline of the Institute.

I note that the decision of the Institute is final in regard to selection and assignment to a particular department and field of study. The Institute shall have the right to expel me from the Institute at any time after my admission, provided it is satisfied that I was admitted on false particulars furnished by me or my antecedents prove that my continuance in the Institute is not desirable. I agree that I shall abide by the decision of the Institute, which shall be final.

Place : \_\_\_\_\_

Date : \_\_\_\_\_

Signature of Applicant

**9. List of enclosure**

- (a)
- (b)
- (c)
- (d)
- (e)

- (f)
- (g)
- (h)
- (i)
- (j)

10. Recommendation of the Proposed Supervisor:

Signature of Supervisor

Name and Designation

11. Recommendation of the Head of the Lab:

Signature of Head of the Lab

12. Recommendation of DRDO HQ

Signature of Competent Authority