

UNIVERSITY SCHOOL OF BIOTECHNOLOGY

Guru Gobind Singh Indraprastha University

Sector-16C, Dwarka, New Delhi-11078, INDIA

Subject: Selected candidates for admission into Ph.D. programme (USBT) for the Academic Session 2021-22.

The USBT Ph.D. admission committee and competent authority has approved the following candidates for admission into Ph.D. programme (USBT) for the academic session 2021-2022.

SL. No	Name of Candidate	Application No.	Category	FT/PT*	Name of Allotted Supervisor
1.	Arushi Jain	241218600038	GEN	FT	Prof. Promila Gupta
2.	Perna Yadav	241218600095	GEN	FT	Prof. Meenu Kapoor
3.	Deepanshi Vijn	241218600103	GEN	FT	Prof. Promila Gupta
4.	Yashika Kanojia	241218600073	SC	FT	Prof. Meenu Kapoor

*FT: Full Time; PT: Part Time.

The above candidates are required to report with the fee slip at USBT office (Room No: 206, A block, GGSIPU University, Sector-16C, Dwarka, New Delhi-110078) at the earliest for document submission. The candidates shall bring the following documents:

1. One set of duly filled registration Form (attached), six passport size photos.
2. One set of all the educational qualification documents/certificates (self attested copy of Master's degree/ Mark sheets/ Provisional certificates, etc)
3. Self attested copy of the other relevant documents under which any exemption/relaxation has been claimed,(NET (JRF)/ GATE etc)
4. No Objection Certificate from employer, if employed
5. Filled Identity Card form (attached)
6. Photocopy of Bank Challan of Rs. 10,000/- after submission of fee of Rs. 10,000/- by the student.

Ph.D Co-ordinator, USBT

(Dean)
USBT



GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY

Sec-16-C, Dwarka Campus, Delhi-110 078

Website: <http://ipu.ac.in>

OFFICE OF THE DIRECTOR (RESEARCH & CONSULTANCY)

APPLICATION FORM FOR REGISTRATION IN THE Ph.D. PROGRAMME

1 Academic Session: _____

2 Full Time: Part Time:

3 Roll No. (For Office use only): _____

4 Name of the Research Scholar (In Capital Letters): _____

5 Discipline: _____

6 Name of the School: _____

7 Name of the Supervisor _____

8 Address for Correspondence : _____

9 E Mail Id: _____

10 Contact No. _____

11 Father's/ Husband's Name: _____

12 Mother's Name: _____

13 Date of Birth:

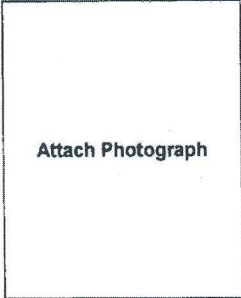
Day	
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Month	
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Year			
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14 Category: Gen/O.B.C.: SC: ST: PWD: Male/Female:

15 Details of the Academic Qualifications & Experience:



(a) Academic Qualifications (Attach Documentary Evidence(s):

S. No.	Examination	School/ College/ University	Subjects	Year of Passing	%age of marks secured/ CGPA
1	Secondary				
2	Sr. Secondary				
3	Graduation				
4	Post Graduation				
5	M.Phil				
6	Others				

(b) Certificate for Qualifying
NET(JRF)/GATE/UGC-CSIR With Details: _____
(NET/JRF)/DBT (JRF)/ICMR
(JRF) (Yes/No):

(c) Details of the Teaching/ Research Experience (Attach Documentary Evidence (s))
1 _____
2 _____
3 _____

UNDERTAKING

I undertake that all the course work prescribed by the University for Ph.D. Programme shall be successfully completed by me, I shall complete the minimum residency period as required by University. I shall abide by all the rules and regulations of the University as in force from time to time.

Signature of the Research Scholar with Date

RECOMMENDATION OF THE DEAN

Recommended/ Not Recommended for _____
Registration into the Ph.D Programme _____

Signature of the Proposed Supervisor with Date

Signature of the Dean with Date

Signature of the DRC with Date

FEE STRUCTURE FOR PRELIMINARY REGISTRATION

- 1 Preliminary Registration fees (This include the fee of the first year) (₹) 10,000/-
- 2 Fee receipt No. with Date: _____

CHECK LIST

- | | | |
|----|--|--|
| 1 | Document(s) for Date of Birth/ Secondary School Certificate/ Marksheet. | <input style="width: 90%; height: 20px;" type="text"/> |
| 2 | Sr. Secondary School Certificate. | <input style="width: 90%; height: 20px;" type="text"/> |
| 3 | Sr. Secondary Marks Sheet. | <input style="width: 90%; height: 20px;" type="text"/> |
| 4 | Graduation Marks Sheet. | <input style="width: 90%; height: 20px;" type="text"/> |
| 5 | Graduation Degree. | <input style="width: 90%; height: 20px;" type="text"/> |
| 6 | Post Graduation Marks Sheet. | <input style="width: 90%; height: 20px;" type="text"/> |
| 7 | Post Graduation Degree. | <input style="width: 90%; height: 20px;" type="text"/> |
| 8 | M.Phil degree / Marksheet | <input style="width: 90%; height: 20px;" type="text"/> |
| 9 | Certificate for Category. | <input style="width: 90%; height: 20px;" type="text"/> |
| 10 | Certificate for Qualifying NET(JRF)/GATE/UGC-CSIR (NET/JRF)/DBT (JRF)/ICMR (JRF) | <input style="width: 90%; height: 20px;" type="text"/> |
| 11 | If approved for Part Time, copy of N.O.C from concerned Department.(in case of regular employee) | <input style="width: 90%; height: 20px;" type="text"/> |
| 12 | Other Document(s) | <input style="width: 90%; height: 20px;" type="text"/> |

(Signature of the Scholar with Date)

Address: _____

(Signature of the Verifying Officer with Date)



Guru Gobind Singh Indraprastha University
Sector 16-C, Dwarka, New Delhi-110078
Academic Coordination Branch

FORM FOR ISSUE OF STUDENT IDENTITY CARD

(Important : see notes below)

Name _____
(Block letters)

Father/Husband's Name _____
(Block letters)

Mother's Name _____
(Block letters)

School and Course _____

Enrolment No _____

Semester _____
(Give year, if annual pattern)

Type of Course (Regular/Weekend) _____

Date of Birth _____
(DD/MM/YYYY)

Blood Group _____

Name of Person & Phone No. to be contacted in case of emergency _____

Mark of Identification _____

Residential Address _____

Phone No _____ Mobile _____ Res: _____

Valid upto _____
(for regular duration of course) 31st July _____ (Year)

Paste here recent
passport size photograph
(to be scanned for I.D
Card)

Paste here recent
passport size photograph
(same as above duly
attested by Dean)

UNDERTAKING

I solemnly affirm that the information furnished above is true and correct in all respects. I have not concealed any Information. I realise that if any information furnished here is found to be incorrect / untrue, I shall be liable to action by the University. I agree to abide by the rules and regulation of University. I understand that, if I am found indulging in any act of misbehavior / indiscipline, disciplinary action will be taken against me.

Counter signature of Dean/Nominee
(with date and Seal)

Signature of Student
(with date)

Notes: -

1. Filled- in form is to be submitted at the office of respective Dean.
2. The form must be duly signed and stamped by the respective Dean/ Nominee at the space given above.
(The form will not be accepted without the signature and stamp of Dean/ Nominee).
3. The Form must be filled up in legible handwriting as per instructions above.
4. All the Columns are compulsory.