

**Annexure –I**  
**Application form for Admission to Ph.D. Programme**



**Nowgong College (Autonomous)**  
**(To be filled in by the candidate)**  
**Session\_\_\_\_\_**

Fix a signed  
Passport size  
Photograph

Online Payment Reference No\_\_\_\_\_ Date \_\_\_\_\_

Department to which Ph.D. admission is sought:\_\_\_\_\_

- 1.Name of candidate :  
(in block letter)
2. Father's name/Husband's name/Gurdian's Name :
- 3.Permanent address :  
(in full)
- 4.Postal address, Email & Mobile No. :  
(for communication)
- 5.Date of birth :
6. Nationality :
7. Whether belongs to SC/ST/OBC/MOBC :
8. Gender (Please tick  ) : Male / Female
9. Educational qualification HSLC onwards(submit attested copies of all testimonials):

Name of Examination	Year	School/College Board/University	% of marks/ Grade points	Div./ Class	Subject/ Specialization

10. Teaching/ Research experience:

(Mention level of teaching-UG/PG/College/Institute/ Courses taught/ Area of research)

11. Tick the category of candidature sought:

Full time:  Sponsored  Part Time  Project

12. Seminar /workshop/conference attended after Post Graduation:

(Separate list may be enclosed)

13. If employed, details of employment:

Organisation	Duration	Position	Regular/temp	Nature of duties

14. If employed, whether leave will be granted/ already granted:

(No objection certificate from the employer to be enclosed)

15. Specialized training (if any) :

16. Scholarship/fellowship awarded for research (if any):

17. Qualified for NET/GATE or similar examination with year (Enclose Certificate) :

18. List of publications (if any) :

19. Whether hostel accommodations required:

**Declaration**

I certify that the information given above is correct/true to the best of my knowledge. If anything is proved to be wrong my admission may be cancelled. If admitted I shall abide by the University rules and regulations

Date:

Place:

Signature of the candidate

**For Office Use Only**

1. Verified by: Name \_\_\_\_\_ Signature \_\_\_\_\_

Designation \_\_\_\_\_

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

2. Recommended/Not Recommended :

Chairperson, Selection Committee

Date: