



केरल केंद्रीय विश्वविद्यालय
CENTRAL UNIVERSITY OF KERALA
Thejaswini Hills, Periyar PO, Kasaragod – 671 316

Application No. _____

(For Office Use Only)

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**Application for admission to Ph.D. Programme for the
Academic Year 2018-19**

1. Name in full (IN BLOCK LETTERS) :Mr./Ms./Mrs.
2. (i) Father's Name :
- (ii) Mother's Name :
3. (i) Address for correspondence (in block letters) :

Telephone No. (with STD code) :

Mobile No :

E-mail :

(ii). Permanent Address :

4. Date of Birth _____

5. Age as on the application deadline ____ Year ____ Months ____ Days ____

6. (i) Students of Special Categories:

(a). If you belong to any of special categories, please write SC/ST/OBC
(OBC only non-Creamy Layer), as applicable (attach a copy of certificate
in support of your claim in this regard.)

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(b) If you are Physically Challenged (Handicapped) (minimum 40% disability)
please write PH (relevant document may be enclosed)

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7	Examinations passed (Name to be specified)	University/College /Institution of Study	Main/Subsidiary subjects	Year of passing	Class/CGPA and percentage of marks obtained
	(i) Post graduation				
	(ii) M. Phil				
8	Name of the University from which the qualifying examination passed				
09	Are you exempted from taking the Doctoral Entrance test of this University		YES/NO		
10	If Yes, please specify		i. Title of the National Test Qualified: ii. Year of Qualifying : iii. Valid upto :		
11	Are you working in a project under a Research Guide of this University who is also the Principal Investigator of the Project				
12	(a) Name of University Department/Recognized Research Centre				
	(b) Name of School of the University				
13	Subject of research Proposed with title				
14	Name and designation of proposed Research Guide				
15	Are you employed? If so, furnish full details relating to employment such as designation of the post held, the name of the office etc. , and attach N.O.C from the employer				
16	Research Experience :				
	(a) Previous research experience if any				
	(b) Papers published (Number)				
17	Details of previous registration, if any				

Declaration by the Applicant

I declare that entries made by me in this form and the documents submitted in support of the information furnished by me are true in all respects and in case any entry or information or document is found to be false, this shall entail automatic cancellation of my admission besides rendering me liable to such action as the University may deem proper. If at any stage it is found that I do not fulfill the minimum prescribed eligibility criteria, or do not satisfy the stipulations in the Ph.D. Regulations of the University/ UGC Regulations concerning , my admission, if granted, shall stand cancelled and I shall have no right to admission whatsoever. I note that my admission to the University and my continuance on its rolls are subject to the provisions of the University Statutes, Ordinances and other Rules, Regulations and Instructions which may be issued from time to time. I shall abide by the rules of discipline and proper conduct which may be framed in this regard. I also declare that I have not been debarred from taking admission in CUK neither have I been declared out of bounds from CUK campus

Station :

Name & Signature of the student

Date :

FOR OFFICE/ DEPARTMENT USE

Date of receipt of application	
Date of Advice of Admission	
Date of Joining in the Department	
Provisional Registration No.	
Remarks if any	
Signature of the HoD	