

DEFENCE INSTITUTE OF ADVANCED TECHNOLOGY
(Deemed to be University)



**APPLICATION FORM FOR ADMISSION TO
Ph.D. PROGRAMME, JANUARY-2024**

Name of Department / School for PhD Programme : _____

| <p>1. Name : _____</p> <p>Date of Birth (DD/MM/YY) : _____ Age : _____</p> <p>Address for Communication: _____ Permanent Address: _____</p> <p>_____</p> <p>_____</p> <p>Pin code : _____ Pin code : _____</p> <p>Phone No : _____ Phone No : _____</p> <p>E-Mail : _____ Fax No : _____</p> | Photo | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--------|------------|---------------------|------------|---------------------|-------|--------------------|-------|-----|-------|-------|-------|-------|-------|-------|-----|-------|-------|-------|-------|-------|-------|-----|-------|-------|-------|-------|-------|-------|-----|-------|-------|-------|-------|-------|-------|-----|-------|-------|-------|-------|-------|-------|
| <p>2. Type of Registration : DRDO Sponsored/Self Sponsored <input type="checkbox"/> Industry Sponsored <input type="checkbox"/> R&D Govt. Org. <input type="checkbox"/></p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>3. Details of University / Institution Studied (SSC, HSC and above)</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>4. Additional Qualifying Examination [if any]</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 / Husband's Name : _____ | (g) Martial Status : _____ |
| (b) Father's / Husband's Occupation : _____ | (h) Gender : Male/ Female |
| | Whether OBC/ SC/ST : Yes / No |
| (c) Mother's Name : _____ | (i) (If yes, enclose attested copy of certificate Issued) |
| (d) Place of Birth : _____ | (j) Whether Physically challenged: Yes / No (If yes, furnish the certificate to this effect) |
| (e) Mother Tongue : _____ | (k) Domicile |
| (f) Nationality : _____ | |

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/Org.:

Signature of Head of the Lab/Org.

12. Recommendation of DRDO HQ/Org.

Signature of Competent Authority