



# तमिलनाडु केन्द्रीय विश्वविद्यालय

(संसद द्वारा पारित अधिनियम 2009 के अंतर्गत स्थापित)

**CENTRAL UNIVERSITY OF TAMIL NADU**

(ESTABLISHED BY AN ACT OF PARLIAMENT, 2009)

नीलक्कुडी परिसर/NEELAKUDI CAMPUS, कंगलान्चेरी/KANGALANCHERRY,

तिरुवारूर/THIRUVARUR - 610 005

AFFIX SELF  
ATTESTED RECENT  
PHOTOGRAPH

TO  
THE REGISTRAR

SIR / MADAM,

I HEREBY APPLY FOR REGISTRATION AS A PH.D STUDENT FOR THE DEGREE OF DOCTOR OF PHOLOSOPHY IN ARTS/SCIENCE/HUMANITIES (SUBJECT)\* ..... OF YOUR UNIVESITY IN THE DEPARTMENT / SCHOOL OF \_\_\_\_\_ AND SUBMIT BELOW THE REQUISITE DETAILS, IF ACCEPTED, I SHALL ABIDE BY THE RULES AND REGULATIONS OF THE UNIVERSITY. PARTICULARS GIVEN BELOW ARE TRUE & CORRECT TO THE BEST OF MY KNOWLEDGE & BELIEF.

1. NAME (IN BLOCK LETTERS).....  
(ACCORDING TO THE SCHOOL LEAVING CERTIFICATE)
2. DATE OF BIRTH ..... SEX ..... MARITAL STATUS .....
3. FATHER'S NAME/MOTHER'S NAME.....
4. CATEGORY: GENERAL/SC/ST/OBC/PHYSICALLY CHALLENGED  
(STRIKE OUT WHICH IS NOT APPLICABLE) - ATTACH PROOF
5. NATIONALITY .....

6. PERMANENT ADDRESS .....

.....

\*Mention subject/discipline ONLY when applying for the Ph.D programme offered by a School/Institute.  
 (Strike out whichever is not applicable)

7. ADDRESS FOR COMMUNICATION:

.....

.....

MOBILE NO. ....

PHONE NO. ....

E-MAIL .....

8. PARTICULARS OF ACADEMIC CAREER:

| Name of the Examinations         | Examination passed | Name of Institute/ University | Major Discipline | Year of Passing | Total Marks obtained | (%) Marks/CGPA |
|----------------------------------|--------------------|-------------------------------|------------------|-----------------|----------------------|----------------|
| SSLC or Equivalent               |                    |                               |                  |                 |                      |                |
| Higher Secondary or Equivalent   |                    |                               |                  |                 |                      |                |
| Bachelor Degree                  |                    |                               |                  |                 |                      |                |
| Master Degree                    |                    |                               |                  |                 |                      |                |
| Post Master Degree               |                    |                               |                  |                 |                      |                |
| M.Phil (One year regular course) |                    |                               |                  |                 |                      |                |

- (i) ATTESTED COPIES OF ALL CERTIFICATES & MARK-SHEET OF DEGREES ETC. MUST BE ENCLOSED.
- (ii) MIGRATION CERTIFICATE, IN ORIGINAL, MUST BE SUBMITTED PRIOR TO DEPOSIT OF REGISTRATION FEES.

9. NAME OF THE FELLOWSHIP AWARDED: CSIR/UGC- JRF qualified/ DST- INSPIRE/ ANY OTHER EQUIVALENT NATIONAL FELLOWSHIPS (PLEASE ENCLOSE RELEVANT DOCUMENT)

10 FELLOWSHIP (IN BLOCK LETTERS):

NAME OF FELLOWSHIP

.....  
.....

11. PROPOSED RESEARCH WORK:

(A) PROPOSED AREA/THEME OF RESEARCH:

(Please refer to Department page on University website for details)

.....  
.....

(B) STATEMENT OF PURPOSE REGARDING RESEARCH OBJECTIVE (100 WORDS)

YOURS SINCERELY

DATE: .....

(SIGNATURE OF THE APPLICANT IN FULL)