

CHARUTAR VIDYA MANDAL UNIVERSITY

Vallabh Vidyanagar

GENERAL INSTRUCTIONS FOR FILLING UP THE APPLICATION FORM FOR RECOGNITION AS RESEARCH SUPERVISOR (GUIDE) FOR PH.D.

- (1) Please visit www.ecvm.net for the eligibility conditions for recognition as research guide. The candidates must satisfy themselves regarding their eligibility for the recognition before filling the application form.
- (2) Candidates who are desirous of applying for recognition in more than one subject will have to submit separate prescribed application form for each subject with separate application Fee.
- (3) The application Processing Fee Rs. 500/- should be payable through Demand Draft / Cheque drawn in favour of "**CVM University**" on any Nationalized Bank payable at Vallabh Vidyanagar. Write your Name, Address, and contact Number on the back of the Demand Draft / Cheque. **The Application Form Fee shall not be refunded.**
- (4) Last date of Application: **31/03/2020**
- (5) Applications received after the last date will not be accepted /entertained. University will not be responsible for any postal delays/loss. Late and defective applications will be summarily rejected and no further correspondence will be entertained in this regard.
- (6) This application is valid only for academic year 2020-2021. There is no provision for reevaluation and reassessment of application once rejected (not recommended) by committee.
- (7) Applicant is requested to enclose all the required attachment (documents) as per serial number mentioned in the application. It is also essential for the application to forward the application through proper channel.
- (8) Attachments of **sr. no. 08** of application are mandatory and it should be as per prescribed Performa.
- (9) Application will not be considered solely on the basis of satisfying the criteria for recognition because the committee concerned for recommending recognition may use its discretion in making its recommendation.
- (10) Applications which are incomplete or do not have required attachments will be rejected. If any column is not applicable to the candidate, please write "**Not Applicable**" or "**NA**".
- (11) Applicants shall inform the University without fail if they were booked for adopting unfair means and were punished for the same. In such case/s the decision of the University will be final.
- (12) Applications submitted on any other format, will not be accepted. Charutar Vidya Mandal University reserves the right to reject any application without giving any reason.
- (13) The applicants in their own interest are requested to retain a photocopy of the Application Form, Fee Receipt and Demand draft for record.
- (14) The decision of the Honorable Provost/President shall be final on any dispute.
- (15) The Application form duly completed in all respect should be sent before last date of receipt of application form on the following address:

**Deputy Registrar,
Academic Section,
Charutar Vidya Mandal University,
Beside B.V.M. College ,Opp. Shastri Maidan,
Vallabh Vidyanagar – 388 120
Dist. Anand, Gujarat (India).**

CHARUTAR VIDYA MANDAL UNIVERSITY
VALLABH VIDYANAGAR

Receipt No. _____
Fee: Rs. 500/-
Code No.:

Application form for Recognition as Research Supervisor (Guide) for Ph.D.

Particulars of the subject for which Ph.D. Guide recognition is sought;

Subject: _____ **Branch of Subject:** _____

PARTICULARS OF TEACHER (APPLICANT)

1. Name in full _____

2. Designation _____

3. Name of the College of the University _____

4. Address (Office) _____

Address (Residential) _____

Mobile No.: _____ Land Line No. _____

E-mail: _____

5. **Qualifications: (Please attach all the mark sheets & relevant certificates.)**

Name of Degree	Class/ Percentage	Month & Year of Passing	Name of the University/ College	Principal/ Major Subject	Encl. at Page No.

6. (A) ***Teaching experience at Post-graduate level as full time teacher (Please furnish relevant proof):**

*** (Note: By teaching, it is meant teaching of the subject for which recognition is sought.)**

Name of University Department/College	Designation	Period of teaching		Total Experience		Encl. at Page No.
		From	To	Years	Months	

(B) *Teaching experience at Graduate level as full time teacher (Please furnish relevant proof):

*** (Note: By teaching, it is meant teaching of the subject for which recognition is sought.)**

Name of College	Name of the subject/ Courses taught	Period of teaching in the final year degree class		Total Experience		Encl. at Page No.
		From	To	Years	Months	

Title of the Ph.D. Thesis*: _____

Date of Notification / Awarding of Ph.D. degree: _____

Name of University: _____

***(Please attach Photocopy of Title Page of Ph.D. Thesis)**

7. Research Experience: (Please provide details for the period after the Ph.D. award)

Name of the Institution	Position	Type of work Done	From	To	Total Period		Encl. at Page No.
					Years	Months	

8. Details of Research Publications with photo copies or reprints: (A separate declaration be provided by candidate)

1. No. of Books published :

Before Ph.D.:

After Ph.D.:

		Encl. at Page No.
1	Please make an index on a separate sheet showing the title of the Book, name of the Author/s, month and year of publication and publisher with ISBN No. Attach photocopy of title page of book with publication details.	

2. No. of Research articles published in standard refereed journals :

Before Ph.D.:

After Ph.D.:

		Encl. at Page No.
1	Please make an index on a separate sheet showing the title of the paper, name of the journal, month and year of publication and publisher with ISSN No. Attach photocopy of Full Paper and Index of Journal for Reference.	

Note: Please note that conference abstracts / paper presentations are not considered as research publications.

9.

	Encl. at Page No.
Approval of all appointments as a teacher with Syndicate Resolution No. _____ & Date _____ (Please attach copies of the same for every appointment)	

10. **Whether recognised by any University as a Ph.D. Supervisor** **Yes / NO**

If yes, State: I) Name of the University: _____

II) Subject in which recognized: _____

III) Date of recognition: _____

IV) Years of experience as a recognised Research Guide: _____

V) No. of students who have got Ph.D. degree under applicant's guidance: _____

I have read & understand the rules and general instruction given in application form, and I hereby declare that the information provided in this application form is correct to the best of my knowledge and understanding. In case of any information furnished by me is found to be incorrect and/or not as per the rules of the University, the University has the right to take any action against me, including the de-recognition of guide ship. I promise to abide by the rules and regulation of the University in force from time to time.

Place : _____

Date : _____

Signature of Teacher (Applicant): _____

Certificate from the Principal / Director of the College

I certify that the above information given by the applicant is correct to the best of my knowledge and belief, I also certify that:

- (i) The applicant is a full time teacher in the college from _____ to _____
- (ii) The applicant fulfills / does not fulfill the minimum eligibility for recognition sought as per the latest rules for the Ph.D. guide ship.
- (iii) The candidate has submitted all the attested documents in support of his educational qualifications, teaching experience and other activities.

Date: _____

Place : _____



Signature of Principal/ Director