

APPLICATION FORM FOR ADMISSION TO

**Ph.D. PROGRAMME
2011-2012**

(FACULTY OF AGRICULTURE)



MAHARANA PRATAP UNIVERSITY OF AGRICULTURE. & TECHNOLOGY.

UDAIPUR – 313001

8. Institutions attended in last 5 years : -

	Name of Institution attended with address	Period		Class in which studies
		From	To	
1.				
2.				
3.				
4.				

9. Are you employed ? If yes give details : (Attach certificates)

(a) Name & Address of Employer : _____

(b) Designation/ Post : _____

(c) Salary : _____

(d) Type & Nature of Job : _____

(e) Experience in research, teaching or extension in Agriculture(indicate no. of years in each and the discipline): _____

(f) Experience in field other than Agriculture (Mention discipline and No. of years : _____

(g) Have you got permission from your employer? (Yes/No)

(h) Have you got leave for full period of study ? (Yes/No)

10. Are you married ? (Yes/No)

11. Are you eligible for tuition fee exemption? (Yes/No)

12. Would you require Hostel accommodation ? (Yes/No)

13. Do you belong to schedule caste or schedule tribe ? (Yes/No)
(If yes, Certificate of competent authority be attached)

I declare that the above information is correct and that I have read all the rules and regulations of the college and University and I will abide the same during my studentship. I further declare that I have not been convicted of any criminal offence nor have been released on bail in connection with a criminal case. No criminal case proceeding is presently pending against me in any court of law. I have also not resorted to any act of indiscipline during the previous year

SIGNATURE OF APPLICANT

Place: _____

Date : _____

List of enclosures : -

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

a) CERTIFICATE OF PRINCIPAL OR DEAN OF COLLEGE OR INSTITUTE LAST ATTENDED

Certified that Shri/ Ms. _____ son/daughter/ wife of Shri _____ has been a student of this Institution from _____ to _____. Further he/she has not taken part in any activity, subversive of the rules, regulations and discipline of this institution.

Place : _____

Signature of the Principal

Date : _____

or Dean with official seal

b) PARENT . GUARDIAN CERTIFICATE

i) I, _____ solemnly affirm that I am the natural father/ mother(if natural father is not alive) of Shri/Ms. _____ and my monthly income is Rs. _____

OR

I, _____ solemnly affirm that Shri /Ms. _____ the son /daughter / wife of Sh. _____ and, I am the guardian of Shri /Ms. _____ as his / her parents have died. Became insane. He/ she is my _____ (State relationship)

ii) I hereby solemnly affirm that the student and information by my son/ daughter(s)/ warde(s) application as also in the enclosed enclosures therein are true. I realize that if any information furnished therein is found to be untrue in material particulars, my ward is liable to criminal prosecution and if admitted, to be removed from the College.

iii) I undertake to be responsible for his/ her conduct and for maintenance of discipline and shall pay regularly all his / her expenses during his/ her expenses during his / her study at the college.

Place : _____

Signature and address of

Date : _____

Parent / Guardian

c) EMPLOYMENT CERTIFICATE OF CANDIDATE

This is to certify that Shri/ Ms _____ son /daughter / wife of shri _____ is serving as _____ (Designation) in the department of _____ in the scale of _____ from _____ to _____. He/ She has Research/ Teaching/ Extension experiences of _____ years. To the best of my knowledge during his / her tenure his / her character was found satisfactory / Un-satisfactory.

Date : _____

Signature of the Employer/ Head
of Institution with official seal

d) CERTIFICATE OF PHYSICAL FITNESS

This is to certify that Mr. / Ms. _____ son/ daughter/ wife of Mr. _____ has been examined by me and the details are given below :-

- | | |
|--|--------------------------------------|
| i. Weight : _____ | ii. Height : _____ |
| iii. Blood Group: _____ | iv. Pulse : _____ |
| v. Blood Pressure: _____ | vi. Rh. Factor: _____ |
| vii. Hemoglobin : _____ | viii) Marks of Identification: _____ |
| ix. Abnormality found/not found \. If abnormality found mention: _____ | |
| x. Disease found : _____ | |
| xi. Communicable disease if any : _____ | |
| xii. He/ She if fit for hard work / not fit for hard work. | |
| xiii. He / She is recommended / not recommended to live in the hostel. | |

Place : _____

Signature of the Medical Officer

Date : _____

with official seal

FOR OFFICE USE ONLY

Shri /Ms _____ son/ daughter/ wife of Shri _____
 _____ has been admitted for Ph.D. in the subject of _____
 _____ at RCA, Udaipur.

- | | |
|-------------------|----------|
| 1. Chairman _____ | 4. _____ |
| 2. Members _____ | 5. _____ |
| 3. _____ | 6. _____ |

Note :-

1. Only attested true copies of the Certificate should be enclosed or Original certificates should not be sent. They will be required to be submitted at the time of admission and registration.
2. Admissions shall be given strictly on the basis of order of merit as decided by the admission committee.
3. Number of seats in a particular class can be increased or decreased by the admission committee of University.
4. Please note that mere fulfillment of a minimum requirement for a particular class does not give a candidate right of admission.
5. The university also reserves the right to deny admission to a candidate without assigning any reasons whatsoever.
6. Candidates found admitted on the false statement or false evidence of any kind will render themselves to dismissal from the college at any time.
7. Following candidates shall not be eligible for admission.
 - i) against whom criminal case/ proceeding is pending.
 - ii) who have been convicted of criminal offence or released on bail.
 - iii) who have indulged in misbehavior.
 - iv) against whom an FIR has been lodged by University / Constituent College authorities.
8. Hostel accommodation is limited and candidates may not be given admission they should make their own arrangement.
9. Reservations will be given as per rules of Government of Rajasthan.