ST. XAVIER'S COLLEGE
(AUTONOMOUS)
5, Mahapalika Marg, Mumbai - 400 001,
INDIA.
✆ 2262 0661/65

Insert Photo

(signed across)

To,

The Principal,
St. Xavier's College
(Empowered Autonomous Institute),
5, Mahapalika Marg,
Mumbai – 400001.

Respected Sir,

I wish to apply for the Ph.D. Programme of, Department of_____.
Please find the filled in application form for your kind consideration.

If admitted, I undertake to regularly report at the place of research unless otherwise permitted by the Principal on recommendation of the Research Guide and shall abide by the rules and regulations of the college.

I declare that the particulars submitted by me are true to best of my knowledge and I shall be liable for action, if found otherwise by college authorities.

Place:

Date :

_____

(Signature of the Applicant)

Department of Biotechnology

Application Form for Admission to Ph.D.

(To be filled in Capital letters only)

1. Name in full (As per Certificate): _____

2. Father's/Husband's Name: _____

3. Mother's Name: _____

4. Date of Birth: _____

5. Aadhar No.: _____ (Attach self-attested copy)

6. Gender: Male / Female Married / Unmarried

7. Nationality: _____

8. Present (Local) Address: _____

_____

_____ Pin - _____ (Tel No.) _____

9. Permanent Address: _____

_____

_____ Pin - _____ (Tel No.) _____

10. i) Mobile No.: _____ ii) Alternate Mobile No.: _____

11. Email Id: (in legible writing) _____

12. Whether belong to reserve category, if so, give details: _____

_____

_____

13. Present Occupation/Employment: _____

(Give Name and Address of the Employer): _____

_____ (Tel No.) _____

14. Particulars of Qualification: **(Attach attested copies of statement of marks and certificates)**

Degree	College / University	Year of Passing	Subject (s) offered	Class / Grade	Percentage / Grade Points
Bachelor's Degree					
Master's Degree					
M.Phil Degree					
Any other Degree/Diploma/ PGDBM (Three years)					
NET/SET/GATE/ PET/Any other similar exam.					

15. Title of M. Phil. Dissertation/ M.Sc. (by Research), if applicable:

_____

_____

16. Particulars of Publications (if any): (Attach copy of one best publication)

Title of the Paper	Name of Publication	Year of Publication

17. Professional Experience (If any)

Designation	Name of Organisation	Nature of Professional Experience	Duration

18. Topic/Area of Interest for Ph.D., If any:

_____

_____

Details of Cheque / Demand Draft :

Name of the Bank : _____

Cheque No / DD No._____

_____

Place:

Date :

_____
(Name and Signature of the Applicant)

***** $ *****