



PH.D. PROVISIONAL REGISTRATION FORM

PH.D. ADMISSION (AY: 2025-26)

Note:

- Provisional Registration form submitted without the NOC of Head of Institute/Organization will not be accepted.
- Provisional Registration form submitted without the consent of Supervisor will not be accepted.
- Candidates are advised to submit the fee only after obtaining the consent of the supervisor.

Latest Color
Photo

Signature

| | | | |
|-----------------|------------------|--|--------|
| Application No. | : 25DR__ - _ _ _ | | |
| Branch | : | | Date : |

| | | | |
|-----------------------|------------|--------------------|-----------------------|
| Candidate Name | : | | |
| Father Name | : | | |
| Mother Name | : | | |
| Contact Details | M.: +91 - | | |
| | Email: | | |
| Aadhar Card No. | : | Date of Birth | : |
| Nationality | : | Category | : Open/SC/ST/OBC |
| Sex | : | Marital Status | : |
| Physically Challenged | : Yes / No | Ph.D. Registration | : Part Time/Full Time |
| Religion | : | Blood Group | : |
| Permanent Address | : | | |
| | | | |
| | | | |
| PIN | : | | |
| District | : | State: | |



Dr. Subhash
University

| | | |
|------------------------|---|--------|
| Correspondence Address | : | |
| | | |
| | | |
| PIN | : | |
| District | : | State: |

A. Research Topic :

B. Institute / Organization in which the candidate is working:

C. Institute / Organization where candidate prefers to do Research Work:

Place :

Signature of Candidate

Date :



Dr. Subhash
University

Consent Letter from Ph.D. Supervisor

To,
The Dean,
Centre for Research and Development,
Dr. Subhash University – Junagadh.

Dear Sir,

I, _____ do hereby accord my consent
to supervise/guide Mr./Ms. _____ as
Ph.D. scholar of Dr. Subhash University, Junagadh – 362001.

Following is the proposed topic of his/her Doctoral Research work:

Thanking you,

Yours Truly,

Date :

Place :

Signature of Supervisor :

Name of the Supervisor :

Name of Institute :

Specialization of Supervisor:

Email Id. :

Mobile No. :



List of Documents to be submitted (Self Attested Hard Copy)

| | |
|--|--|
| Application No : | |
| 1. School Leaving Certificate : | |
| 2. Graduate Mark-sheet (Final Year) : | |
| 3. Graduate Degree Certificate : | |
| 4. Post Graduate Mark-sheet : | |
| 5. Post Graduate Degree Certificate : | |
| 6. CA/CMA/CS Certificate (If Applicable) : | |
| 7. Cast Certificate (If Applicable) : | |
| 8. Valid Non Creamy Layer Certificate (If Applicable) : | |
| 9. Certificate of Physical Disability (If Applicable) : | |
| 10. A Certificate on the letterhead of the current employer organization stating availability of study leave and other conditions, etc. (Applicable to Full-Time/Part time/Sponsored Research Scholars) : | |
| 11. Equivalent Certificate from AIU (If Applicable) : | |
| 12. UGC-NET / UGC-CSIR NET / JRF / SLET / GATE / GPAT Certificate /M. Phil. (If Applicable) : | |
| 13. Teacher fellowship holder Certificate etc. (If Applicable) : | |
| 14. A Certificate from the Parent Institution/University stating equivalent credit weightage has been assigned to the students for the credits earned in the MOOCs opted by him/her through SWAYAM platform in the credit plan of the programme offered by the Parent Institution/University; wherein it should be categorically specified that MOOCs opted by any student has been allowed only for 20% of the total courses offered in a particular program in a semester by the Parent: | |
| 15. Fee Payment Receipt : | |
| 16. Proof of Local Residential Address : | |
| 17. Migration Certificate(it should be Submitted compulsory before completion of coursework) : | |



Note:

- a. Kindly submit the above documents at Centre for research & development in person.
- b. Please take print out of this form and submit the duly filled and signed Provisional Registration form along with requisite documents in hard copy to the University.
- c. Attach self-attested copies of the documents [whichever applicable] along with Provisional Registration form. Also, bring original documents for verification **without fail**.
- d. Candidates applying under Part-Time status shall submit a **‘No Objection Certificate’** on the letter head duly signed by the appropriate authority of the employer organization clearly stating the following –
 1. The candidate is permitted to pursue studies on a Part-Time basis.
 2. That his/her official duties permit him/her to devote sufficient time for research.
 3. He/She will be fully relieved from duty as and when required by the University.
- e. Candidates applying under Part-Time status shall also submit endorsed documents that the laboratory/experimental facility is available at their proposed place of work or if they plan to do experiment in any other University/institute etc. then the candidate must produce a “No Objection Certificate” (NOC) from the respective HOD/Director of the University/Institute etc.
- f. Those candidates not pursuing job anywhere, will have to apply under Full-Time status.
- g. Candidates applying under Full-Time status shall submit a No-objection Certificate from the Head of the Institution of the Supervisor/Co-Supervisor stating permission to conduct the research work at the respective place provided the Institution has sufficient resources available in terms of Infrastructure, equipment, laboratories, materials, chemicals, etc. to carry out the research work.
- h. NOC as mentioned in Points (d), (e) & (g) above as well as **Migration Certificate** are to be submitted in original.
- i. Candidates having pursued Master’s Programme from Dr. Subhash University are not required to submit Migration Certificate.
- j. Candidates, failing to fulfill the above requirements shall lead to cancellation of their candidature.



Dr. Subhash
University

Payment Details:

| Pre-Registration Fee Details | |
|------------------------------|-----------------|
| Tuition Fee(Per Semester) | 35000.00 |
| University Affiliation Fees | 1500.00 |
| Course work Fee | 10000.00 |
| Total Fee | 46500.00 |

Date :

Candidate's Signature: _____

Candidate's Name: _____



Dr. Subhash
University

No Objection Certificate

We have NO OBJECTION if Mr./Ms./Mrs. _____ ,
an Employee in our Institute/Organization is admitted to the Ph.D. Programme of
Dr. Subhash University as a Part Time / Full Time candidate.

We shall grant him/her leave of absence to attend classes / research work at Dr.
Subhash University during his/her Ph.D. Programme.

Place :

Signature of Head of the Institute

Date :

Name :

Institute Seal

Note: Please, take a print on the letter head of your current Institute/Organization.