



FORMIX - 11

UNIVERSITY SCHOOL OF AUTOMATION & ROBOTICS (USAR)
GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY
"A STATE UNIVERSITY ESTABLISHED BY THE GOVT. OF NCT OF DELHI"
East Delhi Campus, Surajmal Vihar, Delhi - 110 092
Email Id: dean.usar@ipu.ac.in



F.No. GGSIPU/USAR/Ph.D./2024-25/1940¹

Dated: 10th June, 2024

**RESULT OF ADMISSION TO THE Ph.D. PROGRAMME (DISCIPLINE-WISE) FOR THE SESSION 2024-25 IN
USAR**


A School Research Committee (SRC) of USAR approved the merit list of provisionally selected candidates for Admission to the Ph.D. Programme in USAR for the disciplines of **Artificial Intelligence-Data Science (AI-DS)/ Artificial Intelligence-Machine Learning (AI-ML), Industrial Internet of Things (IIOT), and Automation & Robotics (A&R)**. The details of selected candidates are given as below:

Sl. No.	Appl. No./ Enrl. No.	Name of the Candidate	Gender	Category	Discipline	Potential Supervisor*
ARTIFICIAL INTELLIGENCE-DATA SCIENCE (AI-DS)/ ARTIFICIAL INTELLIGENCE-MACHINE LEARNING (AI-ML)						
1.	211241000346	Chhavi Dua	Female	General	AI-ML	Dr. Ashish Joshi Dr. Amrit Pal Singh Dr. Amar Arora Dr. Sanjay Kumar Singh Dr. Amit Choudhary Dr. Renu Dalal Dr. Manisha Parlewar
2.	211241000392	Kirti	Female	Schedule Cast (SC)	AI-ML	Dr. Sanjay Kumar Singh Dr. Amit Choudhary Dr. Renu Dalal Dr. Manisha Parlewar
INDUSTRIAL INTERNET OF THINGS (IIOT)						
3.	212241000007	Anuj Kumar	Male	General	IIOT	Dr. Khyati Chopra Dr. Manoj Kumar Dr. Neeta Singh Dr. Ghanendra Kumar Dr. Subhas Nimanpure
AUTOMATION & ROBOTICS (A&R)						
4.	213241000007	Chandra Pratap Pandey	Male	General	A&R	Prof. Ajay Singh Singholi Dr. Sumit Chaudhary Dr. Ravi Butola Dr. R.K. Arya Dr. P.K. Baghel
5.	213241000004	Yashpal Chopra	Male	SC	A&R	Prof. Ajay Singh Singholi Dr. Sumit Chaudhary Dr. Ravi Butola Dr. R.K. Arya Dr. P.K. Baghel

* The candidates shall be allocated supervisor(s) from among the potential supervisors shown against their names. The admission shall be granted on the basis of merit and choice (by candidate) and availability of slots for admission under the sought supervisor at the time of admission reporting.

The above selected candidates are required to report for the allotment of supervisor and registration process on **13th June, 2024 (Thursday) in D-001, Ground Floor, D-Block, at 2:00 PM** with following documents:

1. Two sets of duly filled registration form (Attached).
2. Two sets of Education qualification documents (Self attested copy of Master's Degree/ Mark Sheet/ Provisional Certificate).
3. Self attested copy of the other relevant documents under which any exemption/relaxation has been claimed, (if applicable)
4. Category certificate (SC/ST/PwD/ EwS).
5. Original Copy of No Objection Certificate from employer, if employed (Please ignore, if already submitted at the time of interview).
6. One set of duly filled Identity Card form (Attached).
7. A Demand Draft of **Rs. 60,500/- (Rupees Sixty Thousand Five Hundred Only)** in favour of **Registrar, Guru Gobind Singh Indraprastha University** payable at Delhi.
8. Other documents, if any as per the check list (attached).


(Prof. Arvinder Kaur)
Dean, USAR

Copy for information & necessary action to:

1. Director, Research & Development Cell, GGS IP University.
2. Director, In-Charge, East Delhi Campus, GGS IP University.
3. Controller of Finance, GGS IP University.
4. Head/In-Charge UITS, with the request to upload this notice on the university website.
5. AR to Hon'ble Vice Chancellor for kind information to Hon'ble Vice Chancellor, Please.
6. AR to Registrar for kind information to Registrar, Please.
7. Guard File.


(Vijendra Singh)
Assistant Registrar, USAR



GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY

Sec-16-C, Dwarka Campus, Delhi-110 078

Website: <http://ipu.ac.in>

OFFICE OF THE DIRECTOR (RESEARCH & DEVELOPMENT CELL)

APPLICATION FORM FOR REGISTRATION IN THE Ph.D. PROGRAMME

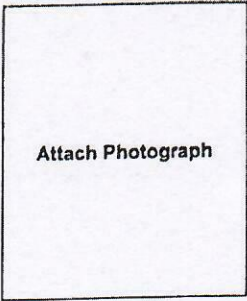
- 1 Academic Session: _____
- 2 Full Time: Part Time:
- 3 Roll No. (For Office use only): _____
- 4 Name of the Research Scholar (In Capital Letters): _____
- 5 Discipline: _____
- 6 Name of the School/Centre: _____
- 7 Name of the Supervisor _____
- 8 Address for Correspondence : _____

- 9 E-Mail Id: _____
- 10 Contact No. _____
- 11 Father's/ Husband's Name: _____
- 12 Mother's Name: _____
- 13 Date of Birth:

Day	
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Month	
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Year			
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- 14 Category: Gen/ O.B.C: SC: ST: PWD: Male/ Female:
- 15 Details of the Academic Qualifications & Experience:



(a) Academic Qualifications (Attach Documentary Evidence(s):

S. No.	Examination	School/ College/ University	Subjects	Year of Passing	%age of marks secured/ CGPA
1	Secondary				
2	Sr. Secondary				
3	Graduation				
4	Post Graduation				
5	M.Phil				
6	Others				

(b) Certificate for Qualifying
NET(JRF)/GATE/UGC-CSIR
(NET/JRF)/DBT (JRF)/ICMR
(JRF) (Yes/No): _____
With Details: _____

(c) Details of the Teaching/ Research Experience if any (Attach Documentary Evidence (s))

1 _____

2 _____

3 _____

UNDERTAKING

I undertake that all the course work prescribed by the University for Ph.D. Programme shall be successfully completed by me, I shall complete the minimum residency period as required by University. I shall abide by all the rules and regulations of the University as in force from time to time.

Signature of the Research Scholar with Date

RECOMMENDATION OF THE DEAN / DIRECTOR

Recommended/ Not Recommended for _____
Registration into the Ph.D Programme

Name of the Ph.D Supervisor allotted : _____

Signature of the Dean/Director with Date

TOTAL FEE PAYBLE AT THE TIME OF ADMISSION

1 Fees Paid _____

2 Mode / Proof of submission of fee with
details: _____

CHECK LIST (Admission)

- | | | |
|----|--|--|
| 1 | Document(s) for Date of Birth/ Secondary School Certificate/ Marksheet | <input style="width: 90%;" type="text"/> |
| 2 | Sr. Secondary School Certificate | <input style="width: 90%;" type="text"/> |
| 3 | Sr. Secondary Marks Sheet | <input style="width: 90%;" type="text"/> |
| 4 | Graduation Marks Sheet | <input style="width: 90%;" type="text"/> |
| 5 | Graduation Degree | <input style="width: 90%;" type="text"/> |
| 6 | Post Graduation Marks Sheet | <input style="width: 90%;" type="text"/> |
| 7 | Post Graduation Degree | <input style="width: 90%;" type="text"/> |
| 8 | M.Phil degree / Marksheet | <input style="width: 90%;" type="text"/> |
| 9 | Certificate for Category | <input style="width: 90%;" type="text"/> |
| 10 | Certificate for Qualifying NET(JRF)/GATE/UGC-CSIR (NET/JRF)/DBT (JRF)/ICMR (JRF) | <input style="width: 90%;" type="text"/> |
| 11 | If approved for Part Time, copy of N.O.C from concerned Department.(in case of regular employee) | <input style="width: 90%;" type="text"/> |
| 12 | Other Document(s) | <input style="width: 90%;" type="text"/> |

(Signature of the Scholar with Date)

Address: _____

(Signature of the Verifying Officer with Date)

(Template for NoC)

<< Issuing Organization/ Institute/etc. Letter Head>>

NO OBJECTION CERTIFICATE

This is to certify that Mr./Ms. << Name of the candidate>> S/o, D/o << Name of the guardian>> is employed with << Name of Organization/Institute/etc.,>>

This is no objection certificate is issued to him/her certifies that:

- i) He/she is permitted to pursue Full Time/Part Time Ph.D. Programme in <<discipline>> from University School of Automation & Robotics, Guru Gobind Singh Indraprastha University, East Delhi Campus, Delhi.
- ii) His/her official duties permit him/her to devote sufficient time for research.
- iii) If required, He/She will be relieved from the duty to complete the course work/exam/viva, etc.,

The undersigned is authorized to issue the No Objection Certificate.

<<Signature>>

Name and Designation of issuing authority

With Stamp

Date: _____

Place : _____



Guru Gobind Singh Indraprastha University
Sector 16-C, Dwarka, New Delhi-110078
Academic Coordination Branch

FORM FOR ISSUE OF STUDENT IDENTITY CARD

(Important : see notes below)

Name (Block letters)	_____	Paste here recent passport size photograph (to be scanned for I.D Card)
Father/Husband's Name (Block letters)	_____	
Mother's Name (Block letters)	_____	
School and Course	_____	
Enrolment No	_____	Paste here recent passport size photograph (same as above duly attested by Dean)
Semester (Give year, if annual pattern)	_____	
Type of Course (Regular/Weekend)	_____	
Date of Birth (DD/MM/YYYY)	_____	
Blood Group	_____	
Name of Person & Phone No. to be contacted in case of emergency	_____	
Mark of Identification	_____	
Residential Address	_____	
Phone No	Mobile _____ Res: _____	
Valid upto (for regular duration of course)	31 st July _____ (Year)	

UNDERTAKING

I solemnly affirm that the information furnished above is true and correct in all respects. I have not concealed any Information. I realise that if any information furnished here is found to be incorrect / untrue, I shall be liable to action by the University. I agree to abide by the rules and regulation of University. I understand that, if I am found indulging in any act of misbehavior / indiscipline, disciplinary action will be taken against me.

Counter signature of Dean/Nominee
(with date and Seal)

Signature of Student
(with date)

Notes: -

1. Filled- in form is to be submitted at the office of respective Dean.
2. The form must be duly signed and stamped by the respective Dean/ Nominee at the space given above.
(The form will not be accepted without the signature and stamp of Dean/ Nominee).
3. The Form must be filled up in legible handwriting as per instructions above.
4. All the Columns are compulsory.

GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY

76 Sec-16 C, Dwarka Campus, Delhi-110 078

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गुरुगोबिन्द
सिंह इन्द्रप्रस्था

Website: www.ggsipu.ac.in

76
आज्ञादी ३
अमृत महोत्सव

OFFICE OF THE DIRECTOR (RESEARCH & DEVELOPMENT CELL)

Ph: 011-25302123 & email Id: drc@ggsipu.ac.in

L.No. GGSIPURDC/2024/2316

Dated:01.04.2024

NOTICE

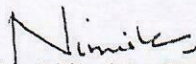
Fee structure for Ph.D programmes from the Academic Session 2024-25

With reference to the Admission Brochure for the Ph.D. programme for the academic session 2024-25 available on the University website, the fee structure for Ph.D programmes is as under:

Sl. No.	Fee Head	Amount (Rs.)
1	Tuition Fee (Per Annum)	25,000/-
2	University's Charges (Per Annum)	20,000/-
3	Alumni Contribution Fund (One Time Non - refundable)	2,000/-
4	Security Deposit (One Time - Refundable)	10,000/-
5	Examination Fee (Per Annum)*	3,000/-
6	Innovation and Incubation Fee (Per Annum)*	500/-
A	Fee Payable per year (1+2+5+6)	48,500/-
B	Fee Payable (one time) at the time of admission (3+4)	12,000/-
	Total fee payable at the time of admission (A + B)	60,500/-

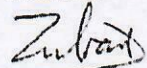
* Note : As approved by Finance Committee vide Agenda Item No.64.11, subsequently approved in the 80th Meeting of Board of Management of GGSIP University vide Agenda Item No.80.34, notified vide no. F.No. GGSIPU/Coord/80th BOM/2023/928 dated 30.11.2023 that "The Board of Management considered and approved the levy of separate Examination Fee @ Rs.3,000/- per student / per annum from the Academic Session 2024-25." In addition to this Innovation and Incubation Fee of Rs.500/- to be paid by all the students of USSs and Affiliated Institution every year from the Academic Session 2024-25, as approved in 65th Finance Committee meeting held no 29th December, 2023.

This is for the information of all stakeholders.


(Prof. Nimisha Sharma)
Director (RDC)

Copy to:-

1. All Deans/Directors.
2. Head, UITS with the request to upload the same on the university website.


(Dr. Zubair Ahmed Khan)
Associate Director (RDC)