



GURU GOBIND SINGH  
INDRAPRASTHA  
UNIVERSITY

University School of Education  
Guru Gobind Singh Indraprastha University  
Dwarka, New Delhi 110078



Date: 16.08.2023

GGSIU/USE/2023-24/ 175

**Provisionally Selected list of candidates for Academic Session 2023-24 for  
Ph.D. (Education) programme**

The admission committee for Ph.D. (Education) programme at USE has approved the following candidates for provisional admission to Ph.D. (Education) programme for the Academic Session 2023-24:


S. No.	APPLICATION NO.	NAME	MODE OF RESEARCH	CATEGORY	SUPERVISOR
1.	311230000004	Megha Kwatra	Full Time	General	Dr. Amit Ahuja
2.	311230000007	Shweta Dogra	Full Time	General	Dr. Shalini Yadava
3.	311230000011	Rachana	Full Time	General	Dr. Shalini Yadava
4.	311230000093	Sangam	Part Time	General	Dr. Anjali Shokeen
5.	311230000050	Raj Rani	Full Time	SC	Dr. Anjali Shokeen
6.	311230000037	Deepa Kumari	Part Time	Gen.- EWS	Dr. Amit Ahuja

\*All the above candidates are required to report on 24.08.2023 at 11 AM at room no. C-403, USE, GGSIPU along with the following documents:

- Two sets of duly filled attached registration form.
- All Original Documents.
- Two sets of self attested copies of documents as per the attached checklist.
- Two sets of self-attested copy of the other relevant documents under which reservation has been claimed (if applicable)
- The part time candidates have to submit No Objection Certificate (in original) from the employer.
- Identity card form (attached).
- Demand Draft of Rs. 57,000/- (Rupees Fifty Seven Thousand only)- in favour of Registrar, Guru Gobind Singh Indraprastha University payable at Delhi.

  
16.08.23

Dr. Amit Ahuja  
Ph.D. Coordinator

  
Prof. Vivek Sachdeva  
Dean, USE

**Copy to:**

1. DRC, GGSIPU for the information.
2. USE Ph.D. admission file.
3. In-charge, UITS with a request to upload on university website

Dean  
University School of Education  
Guru Gobind Singh Indraprastha University  
Sector-10C, Dwarka, New Delhi-110078



# 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

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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. \_\_\_\_\_

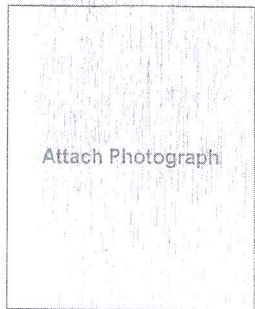
11 Father's/ Husband's Name: \_\_\_\_\_

12 Mother's Name: \_\_\_\_\_

13 Date of Birth: Day   Month   Year

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 (₹) 57,000/-

2 Mode / Proof of submission of fee with  
details: \_\_\_\_\_



57/c

**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)  
Father/Husband's Name \_\_\_\_\_  
(Block letters)  
Mother's Name \_\_\_\_\_  
(Block letters)  
School and Course \_\_\_\_\_  
Enrolment No \_\_\_\_\_  
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<sup>st</sup> July \_\_\_\_\_ (Year)

Paste here recent  
passport size photograph  
(to be scanned for I.D  
Card)

Paste here recent  
passport size photograph  
(same as above duly  
attested by Dean)

**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.

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### CHECK LIST (Admission)

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

\_\_\_\_\_  
(Signature of the Scholar with Date)

Address: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
(Signature of the Verifying Officer with Date)