

#### UNIVERSITY SCHOOL OF DESIGN & INNOVATION (USDI)

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.usdi@ipu.ac.in.

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F.No. GGSIPU/USDI/Ph.D./2024-25/2001

Dated: 21st June, 2024

### RESULT OF ADMISSION TO THE Ph.D. PROGRAMME (DESIGN) FOR THE SESSION 2024-25 IN USDI

A School Research Committee (SRC) of USDI approved the merit list of provisionally selected candidates for Admission to the Ph.D. Programme in USDI for the discipline of Design. The details of selected candidates are given as below:

Sr. No.	Application Number	Applicant Name	Gender	Category	Discipline	Potential Supervisors*
1	341241000020	Ahmadullah Khan	Male	General	Design	Dr. Tiju T Thomas
2	341241000019	Dharini Kumar	Female	General	Design	Dr. Tiju T Thomas Dr. Nanki Nath
3	341241000010	Divyansh Singh	Male	General	Design	Dr. Nanki Nath Dr. Nikhilesh Sharma
4	341241000022	Yogesh Kumar Bhanu	Male	Schedule Caste (SC)	Design	Dr. Tiju T Thomas Dr. Nikhilesh Sharma
5	341241000003	Ms. Shubhangi Saxena	Female	General	Design	Dr. Tiju T Thomas Dr. Nikhilesh Sharma
6	341241000013	Himanshu Mishra	Male	General	Design	Dr. Tiju T Thomas Dr. Nanki Nath Dr. Nikhilesh Sharma

\* 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 25th June, 2024 (Tuesday) in B-205, Second Floor, B-Block, at 11:00 AM with following documents:

- Two sets of duly filled registration form (Attached).
- 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)
- 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).

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- One set of duly filled Identity Card form (Attached).
- A Demand Draft of <u>Rs. 60,500/- (Rupees Sixty Thousand Five Hundred Only)</u> in favour of <u>Registrar, Guru Gobind Singh Indraprastha University</u> payable at Delhi.
- 8. Other documents, if any as per the check list (attached).

(Prof. Arvinder Kaur) Dean, USDI

#### 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, USDI



# 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 Sess	sion:							anger Parine and an array of Parine and and
2	Full Time:			Part Ti	me:				Dt
4	Roll No. (For Office use only): Attach Photograph  Name of the Research Scholar (In Capital Lottors):								
5	Discipline:				The same of the sa				
6	Name of the So	chool/Centre:						L	
7	Name of the Supervisor								
8	Address for Correspondence :								
9	E-Mail Id:					The state of the s			
10									
11		and's Name:							
12	Mother's Name:								
		Day		Month				Year	
13	Date of Birth:								
14	Category:	Gen/ O.B.C:	SC:		ST:	PWD:		Male/ Female:	
15	Details of the Ac	cademic Qualification	s & Expe	erience:					
(a)	Academic Quali	fications (Attach Doc	umentary	/ Evidence	e(s):				
S. No.	Examination	School/ College/ University		Subj	ects	Year of	Passing		of marks d/ CGPA
1	Secondary								
2	Sr. Secondary		EATE	ka ir	JE TREE				
3	Graduation								
4	Post Graduation								
5	M.Phil								
6	Others								

(b)	Certificate for Qualifying NET(JRF)/GATE/UGC-CSIR (NET/JRF)/DBT (JRF)/ICMR With Details:
(c) 1	Details of the Teaching/ Research Experience if any (Attach Documentary Evidence (s)
2	
3	
	UNDERTAKING
suc	I undertake that all the course work prescribed by the University for Ph.D. Programme shall be accessfully completed by me, I shall complete the minimum residency period as required by University. I shall de 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
Red Red	commended/ Not Recommended forgistration into the Ph.D Programme
Nar	me 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)** Document(s) for Date of Birth/ Secondary School Certificate/ Marksheet Sr. Secondary School Certificate Sr. Secondary Marks Sheet 3 **Graduation Marks Sheet** 5 **Graduation Degree** Post Graduation Marks Sheet 6 7 Post Graduation Degree 8 M.Phil degree / Marksheet Certificate for Category Certificate for Qualifying NET(JRF)/GATE/UGC-CSIR (NET/JRF)/DBT (JRF)/ICMR 10 (JRF) If approved for Part Time, copy of N.O.C from concerned Department.(in case of 11 regular employee) Other Document(s) (Signature of the Scholar with Date) Address: (Signature of the Verifying Officer with Date)



#### 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)

Counter signature of Dean/Nomic (with date and Seal)	nee		Signature of Student (with date)
the University. I agree to abide by the act of misbehavior / indiscipline, disci	e rules and regulation plinary action will be	is true and correct in a	all respects. I have not concealed and the concealed and the liable to action by and that, if I am found indulging in any
Valid upto (for regular duration of course)	31 <sup>st</sup> July	(Year)	
Phone No	Mobile	Res:	
Residential Address			
Mark of Identification	-		
Name of Person & Phone No. to be contacted in case of emergency			
Blood Group			
Date of Birth (DD/MM/YYYY)			8
Type of Course (Regular/Weekend)	•		(same as above duly attested by Dean)
Semester (Give year, if annual pattern)			Paste here recent passport size photograph
Enrolment No			
School and Course			
Name (Block letters) Father/Husband's Name (Block letters) Mother's Name (Block letters)			Paste here recent passport size photograph (to be scanned for I.D Card)

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.