



GURU GOBIND SINGH
INDRAPRASTHA
UNIVERSITY

University School of Education
GGS Indraprastha University
Dwarka, New Delhi 110078



GGSIU/USE/2025-26/187

Date:21.01.2026

CORRIGENDUM

Notification

Interview for Ph.D. Admission Session 2025-26 (Winter Session)

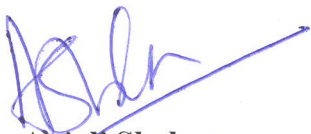
For admission to the Ph.D. programme in University School of Education (USE) for the session 2025-26 (Winter Session) all below is revised list of PET qualified and PET exempted candidates are required to appear for the interview scheduled on 22nd Jan 2026 from 09:30 am onwards in Room No. C-404, Block-C, GGSIU, Sector-16 C, Dwarka, New Delhi-110078.

S.No.	Application Number	Name
01	2531102021	RAVLEEN KAUR
02	2531102003	AKANKSHA AWASTHI
03	2531102007	BHAWNA CHAUHAN
04	2531102018	NISHA SINGH
05	2531102025	SHUBHAM SINGH
06	2531102005	ASHIMA SANGHVI
07	2531102017	NAVEEN KUMAR MORYA
08	2531102014	MAHIMA GAUTAM
09	2531102001	ADITI VERMA
10	2531102016	MONICA CHAURASIA
11	2531102010	GARIMA SOLANKI
12	2531102020	POONAM YADAV
13	2531102008	CHANCHAL
14	2531102004	ALKA YADAV
15	2531102006	BHAWANA SAINI
16	2531102012	KARTIKEY SINGH
17	2531102013	MAHESHWOR LEISHANGTHEM
18	2531102015	MANASVI CHAUDHARY
19	2531102022	SALONI CHOUDHARY
20	2531102024	SHIVANI
21	2531102026	SONALI
22	2531102028	TABASSUM KHAN
23	2531102029	TRIPTI JUYAL

Note: No information would be sent separately for the interview. TA/DA will not be admissible for attending the interview. At the time of document verification, if any candidate is found ineligible he/she will not be allowed to appear for the interview.

1. Completely filled Ph.D. Form (Attached below).
2. Original documents along with two set of self attested photocopy and two passport size photographs.
3. If employed, "No Objection Certificate" from the current employer clearly stating that:
 - *the candidate is permitted to pursue studies on a full-time/part-time basis.
 - *his/her official duties permit him/her to devote sufficient time for research.
 - *if required he/she will be relieved from the duty to complete the coursework.

4. Seven copies of tentative research proposal (Max. 1000 words) along with one Page of curriculum vitae.
5. Self attested copy of the certificate on the basis of which exemption is claimed.
6. Self attested copy of University issued admit card.
7. Copy of submitted application form of the Ph.D. Entrance Test (PET).
8. Self attested copy of PG qualification along with mark sheets.
9. Candidates shall be required to make an oral presentation on the topic of their research interest followed by the interview.



Dr. Anjali Shokeen
Ph.D. Coordinator



Prof. Saroj Sharma
Dean, USE

Copy to:

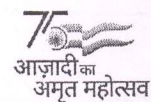
1. *Director, R&C for kind information*
2. *Head, UITS for uploading on the university website*



GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY

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

Website: www.ipu.ac.in



OFFICE OF THE DIRECTOR (RESEARCH & DEVELOPMENT CELL)

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

APPLICATION FORM FOR REGISTRATION IN THE Ph.D. PROGRAMME

- 1 Academic Session: _____
- 2 Full Time: Part Time:
- 3 Enrollment 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 and Co-Supervisor (if any): _____
- 8 Address for Correspondence : _____
- 9 E-Mail Id: _____
- 10 Contact No. _____
- 11 Father's/ Husband's Name: _____
- 12 Mother's Name: _____

Attach
Photograph

- 13 Date of Birth:

Day	
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Month	
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Year			
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- 14 Category:

Gen/OBC	EWS:	SC	ST	PWD	Male/ Female/ Transgender:

- 15 Details of the Academic Qualifications & Experience:

(a) Academic Qualifications (Attach self-verified copy of the 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) Qualified NET(JRF)/GATE/UGC–
CSIR (NET/JRF)/DBT
(JRF)/ICMR (JRF)/Others)

Yes/No

Details: _____
(Attach certificate, if applicable)

(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

CHECK LIST (Admission)

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

(Signature of the Scholar with Date)

Address: _____

(Signature of the Verifying Officer with Date)