

## भारतीय सूचना प्रौद्योगिकी संस्थान राँची INDIAN INSTITUTE OF INFORMATION TECHNOLOGY, RANCHI

(An Institution of National importance under act of Parliament)

Ranchi, Jharkhand, India

Ac	lvt. No.:							Da	te:	
	A	Appli	cation for	m for Phl	D Admissio	n				
(i)	Deapartment:									
(ii)	Admission Category: *Refer to Table-1 of PhD ad									
			Photograph							
	Registrarion No:									
(ii)	Signature of the receiving	ng of	ficer:							
(iii)	Date of Receipt:									
		1								
1.	Name in Full									
2	(In Block Letters)									
2.	Father's/Husband/Wi fe Name									
3.	Date of Birth:	Gen	dar	Age:	Marital S	tatue:	Na	tionality:	Religi	on:
3.	(dd/mm/year)	GCII	uci.	Agc.	Iviaiitai S	iaius.	INA	monanty.	Kengi	OII.
	(dd/iiiii/ycar)	e/Female	Married/I	Unmarried						
4.	Category (UR/EWS/O		SC/ST)							
	(Enclose proof in case	of								
	EWS/OBC/SC/ST)	11	1							
	Whether Physically Ch									
5.	(Yes/No)									
3.	Present Employment with Salary Details, if any Institute/Organization Designation Nature Pay							rade	Total Sal	oru
	mstitute/Organizatio	Design	mation	of Work	Pay Band			(Per mon		
					OI WOIR		-	a u y	in Rs.	i (iii)
6.	Address for		l					l .		
	Correspondence									
		Dia	Cada							
	Mobile Nos.	rın	Code:							
	IVIOUIIC INUS.									
	Email									

7.	Permai	nent Addr	ress														
			F	in Co	vde:												
8.	Educat	ional Qua				l moi	re row	's if	`neede	ed)							
0.	Sl. No.	Degr Obtai	ree	Specializat						of the	te	Year of Passing	% of Marks/ CGPA	Class/ Division			
	(i)	M. Tech	ı										00111				
	(ii)	B. Tech															
	(iii)	XII Clas	ss														
	(iv)	X Class															
	(v)	Other if	any														
9.	M Tec	h Degree	Details														
9.		Tech Diss		Title													
	(ii) Area of M.Tech Dissertation work																
	(iii)Na	me(s) of S	Superviso	or(s) &	λ Addre	SS											
10.		/UGC-NE		NET	Examin	atio	n Qual	lifie	ed, if a	ny (att	ach	self-attest	ed copy of	of relevant			
		ination me	Reg. N	. No. Bra		ch Year		ar Marks		Score		All India Rank (AIF		id/Invalid urrent year			
11.		rial Exper								. 1							
	Indus	try/Organ	ization	Star	t Date	En	nd Dat	e	Dura	ation	De	esignation	Nature of work	Pay Scale			
12.	Teachi	ng Experi	ience Det	ails, i	f any												

	Institute/Organization	Star	t Date	End Da	ate	Duration	Designa	tion	Nature of work	Pay Scale
13.	R & D Experience Detail	ls, if a	ny	•		•	<b>.</b>		-1	•
	Institute/Organization	Star	t Date	End Da	ite	Duration	Designa	tion	Nature of work	Pay Scale
14.	Administrative Experien	ce Det	tails if	anv						
11.	Institute/Organization		t Date	End Date		Duration	Designation		Nature of	Pay Scale
									work	
15.	Courses Taught during l	ast 3 v	ears. if	anv						
10.	Course Title	ast 5 y		Level	(UG	/PG)	Bra	ınch		No. of
16.	Number of Publications, if any (Please attach a separate sheet with all details and also list the SCI/Scopus Journal papers along with ISBN No.):									st the best
	Nati					ublished (SC	CI/Scopus)	In-	Press (SC	I/Scopus)
	(i) Refereed Journals	Na	tional							
		Inte	ernation	nal						
	(ii) Conference	Na	tional	onal						
	Proceedings		ernation	nal						
17.	Number of Deales Dublis			141						
1/.	Number of Books Publis					ICDN	Τ,	Van af	Domint	
	Title of the Book		Name of Author(s)		Name of the Publisher					No./ Edition No.
								+		
18.	Number of Chapters Pub	olished	, if any	<u> </u> :						
	Title of the Chapter & Book	N	ame of uthor(s)	Nan		ne of the blisher	ISBN No.	Year of Publication		Reprint No./ Edition No.
19.	Editor of Journals, if any	ı								
1).	Name of	Name of t	he Publish	Branch No. of  details and also list the best  bus) In-Press (SCI/Scopus)  BN Year of Publicati on Edition No.  Vear of Publication No./ Edition No./ Edition No./ Edition No./						

20.	20. Reviewer of Journals, if any												
	Name of		Name of the	Publis	her	National /International							
21.	Number of Patents, if an												
	Name of Patent	Awardin Organizat		Registration No. Date & Y Awa			e & Y Awai		Submitted if any				
22.	Consume of Allerday they Due	i a a ta	: C a		Com	lotodi				On saina			
22.	Sponsored/ Industry Pro	-		Voor	Completed: Year of PI/			-	Total	On-going:			
	Title of the Project		Spons ored Agen	Year of Completion		Co-investi	gator			ed/			
			cy							Ongoing			
23.	Number of Awards/ Ho	nours/I	Prizes/Mo	edals:									
	Awarded (Title)												
	Proposed, if any												
24.	1 7 1												
	Type of the		Sponsoring Pe				Coordinator/						
	Course/Workshop etc.	Cou	ırse/Worl	kshop et	c. Agency			Course		Co- Coordinator			
										Coordinator			
							1						
25.	Membership/Fellowship	in Pro	ofessiona	1 Bodies	, if an	Ŋ							
	Name of the					Membership status (Life/ Annual)							
26.	Name two referees with address	compl	lete conta	ct detai	ls incl	uding address	s, Tel.	Nos.,	Fax No	s., Email			
	(i)												

	(ii)									
27.	Application Fee:									
	a. SBI Collect /Payment Reference Number:									
	b. Date of Payment:									
	c. Payment Amount:									
	d. Candidate Name:									
	e. Candidate Mobile Number:									
28.	Any other relevant information									
	List of Enclosures (Academic and Professional Qualifications)									
	(i)									
	(ii)									
	(iii)									
	(iv)									
	(v) (vi)									
	DECLARATION									
	DECEMENTION									
of m infor	eby, solemnly declare that the information furnished in this application are true and correct to the best by knowledge and belief. If at any time I am found to have concealed/ suppressed any material/ mation or given any false details, my admission shall be liable to be summarily terminated without the of compensation.									
Place	e:									
Date	Signature of the Applicant									