



**VINAYAKA MISSION'S RESEARCH FOUNDATION, SALEM**  
**(Deemed to be University)**  
**( Declared under Section 3 of the UGC Act, 1956)**

**APPLICATION FOR M. Phil (FT) ADMISSION – APRIL – 2018**

Read the Regulations Governing M.Phil (F.T) Program before filling. Wherever a box is provided, place a tick mark ( √ ) inside to indicate “yes”. Strike out whichever is not applicable.

1. Name (in BLOCK letters) :  
(As in PG degree Certificate)
2. Faculty of your PG Degree qualification :
3. Discipline of your PG Degree qualification:
4. Name of the University from where PG degree awarded \_\_\_\_\_
5. Programme for which applying M. Phil (F.T) in \_\_\_\_\_
6. Date of Birth \_\_\_\_\_ Age :
7. Gender :  Male  Female
8. Nationality \_\_\_\_\_ :
9. Social Status OC/BC/MBC/OBC/SC/ST \_\_\_\_\_ : Caste: \_\_\_\_\_
10. Address for communication

Affix a recent  
passport size  
photograph

|   |  |
|---|--|
| <p>Office ( If employed )</p> <p>Designation: _____</p> <p>Department _____</p> <p>Organization _____</p> <p>Place _____</p> <p>Dist &amp; State _____</p> <p>Pincode _____ :</p> | <p>Address for communication</p> <p>-----</p> <p>-----</p> <p>-----</p> <p>Place: -----</p> <p>Dist &amp; State: -----</p> <p>Pincode: -----</p> |
| <p>Phone : (with STD Code): -----</p> <p>Mobile: -----</p>  | <p>Phone : ( with STD Code ) -----</p> <p>Mobile: -----</p>  |
| <p>E-Mail Id :</p>  | <p>E-Mail Id</p>   |

### 11. Academic Credits

(Enclose copies of Degree certificates and Mark Sheets duly attested. Start with the latest degree obtained).

| S.No | Degree | Year of Passing | College | University | Major Discipline/ Specialization | Class Obtained | % of Marks/ Obtained CGPA | Regular Course/ Others (Specify) |
|------|--------|-----------------|---------|------------|----------------------------------|----------------|---------------------------|----------------------------------|
|      |        |                 |         |            |                                  |                |                           |                                  |

12. Are you qualified in UGC – NET/CSIR/SLET/

GATE/ teacher fellowship holder or equivalent/ : Yes / No

(If yes, details with evidence)

13. Area of Research ( Tentative) :

14. Department and college for Research :

### 15. Particulars of payment of Application Fee:

| Name of the Bank & Branch | Demand Draft No | Date | Amount |
|---------------------------|-----------------|------|--------|
|                           |                 |      |        |

Note: Application fee of Rs. 1000/- need to be drawn in favour of “VMU Ph.D a/c”, payable at Salem.

### 16. Declaration by the candidate

This is to certify that the particulars given above are correct and complete to the best of my knowledge and belief. I am aware that any wrong information or suppression of facts may result in punitive action in addition to cancellation of my candidature for admission to the programme irrespective of the status of my research work.

Place :

Date :

Signature of the Candidate