

VINAYAKA MISSION'S RESEARCH FOUNDATION, SALEM

(Deemed to be University)

Declared Under Section 3 of the UGC Act, 1956

Application for recognizing as eligible research supervisor

Affix latest
Passport
size
photograph

1. Name in BLOCK Letters :
(as entered in the
qualifying degree
certificate)

2. Designation and present
official address :
.....
.....PIN.....Phone (with area code).....
Mobile.....

3. Permanent address :
.....
.....PIN.....Phone (with area code).....
Mobile.....

4. Address for communication :
.....
.....PIN.....Phone (with area code).....
Mobile.....

5. a) Date of Birth (DD / MM / YYYY) : b) age :
c) Email id :
d) Probable Date of Superannuation :

6. Academic Qualification (Details of all the degrees taken, starting with the highest degree) [Please attach attested copies of all the degree certificates]

Degree	Year	University	Subject	Faculty	Class / Division	Mode: Regular / Dist. Edu / etc...
a) Ph.D.						

7. Teaching experience (Regular)

Programme	Year(s) (From - To)	Institution	University	Subject
Postgraduate				
Graduate				

8. Research experience

	Year(s)	Institution	University	Subject	No. of papers published in Referred / indexed journals
Ph.D.					

9. Ph.D. details

University	Subject & title of thesis	Faculty / Division	Date of Viva - Voce

10. List of publications after the award of the Ph.D. degree, in referred/indexed journal(s) (If needed an additional sheet may be used)

S. No.	Title of paper	Names of all authors in actual sequence	Name of the journal	Page No.	Vol. No.	Year

11. Subject / Division and Faculty in which supervisorship is presently sought:

Subject (Division) :

Faculty :

12. Particulars of supervisorship held (in this and all other Universities)

S. No.	University	No. of candidates		Remarks (if any, on completion date etc)
		As Supervisor	As Co - Supervisor	

Date :

Seal

Signature

Forwarded

Head of the Department
Name in BLOCK LETTERS :

Head of the Institution
Name in BLOCK LETTERS :

Date :

Date :

Seal

Seal