

PACIFIC ACADEMY OF HIGHER EDUCATION AND RESEARCH UNIVERSITY, UDAIPUR

(Application Form for Recognition as Ph.D. Research Supervisor)

Faculty_		Subject/E	Branch:			
1. Full N	ame of the Teacher:					
(in bl	lock letters)					Passport Siz
2. Orga	anization & Designation:					Photograph
3. Date 0	of the first appointment in College	:				-
4. Date of	of Birth:					
5. Age at	the time of application:					L
6. Officia	al address:					
7. Perma	nent address:					
8. Addre	ess for correspondence:					
		E-mail Ado	dress:			
Phone No	Phone No. (O) (R) Mobile No.:					
9. Educa	tional qualification					
(Enclose	attested copies of certificates)					
	(Starting from Graduation) University Passing CG		CGPA	ercentage/ Specializat GGPA a Division		
10. Expe	rience (Enclose attested copies of	relevant certificat	tes)			
Sr. No.	Name of the organization	Designation	Durati			rks, if any

11. Kesearch Experience	11.	Research	Experience
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- (a) Ph.D. Topic, Faculty, Department and University
- (b) M.Phil. Topic, Faculty, Department and University
- (c) Sponsored Research Projects undertaken

(Enclose attested copies of relevant certificates/

documents) 12. Research Publications

(Enclose self attested copies of relevant certificates/ documents)

Sr. No.	Title	Name of Journal/Conference	Vol./Year/Page No.

- 13. Books Authored/ Co-Authored and Publications
- 14. Other Publications (Please enclose attested copies of relevant certificates/ documents)
- 15. Paper Presentation in National/International Seminars & Conferences

(Please enclose attested copies of relevant certificates/ documents)

Theme of Conference/	Title	Organizer	Date
Seminar			

16. Any other information	n(s) you would like to submit:		
(Please enclose attested c	opies of relevant certificates/	documents)	
17. Are you a registered su If Yes, Name & Address	ipervisor of UGC recognised to of University.	iniversity	

18. Declaration by the Applicant: I solemnly declare that, the information given
in the application form is correct to the best of my knowledge and belief. I shall also abide the by rules and regulations of Ph.D. programme as well as the code of conduct for recognized research supervisor.
Date:
Place: Signature of Applicant
19. Remark of the Dean Faculty (PAHER, University) Application form of Dr for registration as
Supervisor at the Doctoral Degree Programme Science/ Engineering/Dental Science/Pharmacy/Management/Hotel Management/Fashion Technology/Media & Mass Communication/Computer Science/Physical Education/Social Science & Humanities/Commerce/Education (Ph.D. Programme) conducted by Pacific Academy of Higher Education And Research University, Udaipur.
Date:
Place: Signature of the Dean Faculty with seal
20. Recognition by the University
Application of Dr. /Prof
is Approved /Not approved for Recognition as Ph.D. Research Supervisor in the Faculty of
of Pacific Academy of Higher Education And
Research university, Udaipur.
Date:Signature of Dean PG Studies