**INFORMATION SHEET** ~~(PAIS)~~

 **FORM - 1**

(To be submitted at the time of admission)

March 2024

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One passport size Photograph (color)

1. **Name of the Scholar (Block Capital Letters):**
2. **Father’s Name:**
3. **Roll No. (To be given after the admission):**
4. **Name of the Department/Centre:**
5. **Category of Admission (Category A, B, C, etc.):**
6. **(a) Gender (Male/Female/Transgender): (b) Blood Group:**
7. **Marital Status (Married/Single):**
8. **Identity Card Name and Number:**
9. **(a) Category (OPEN/ OBC-NCL/SC/ST/EWS): (b) PwD (Yes/No):**
10. **(a) Nationality (Indian/Foreign):**

**(b) In case of Foreigner - Passport No: Visa No:**

1. **Complete Postal Address with PIN Code:**
2. **Telephone/Mobile No.: E- Mail ID:**
3. **Academic Qualification: (Starting from Madhyamik (10th) or Equivalent Examination)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of Exam. Passed** | **Name of the School/College/ Institute/University** | **Year of Passing** | **Discipline/ Specialization** | **Percentage of Marks /CGPA** |
|  10th Standard |  |  |  |  |
|  12th Standard |  |  |  |  |
|  Under-Graduate |  |  |  |  |
|  Post-Graduate |  |  |  |  |

1. **Performance in National Eligibility Test**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Qualified Examination** | **Year of Qualification** | **Branch** | **Score** | **Rank** |
| **GATE** |  |  |  |  |
| **NET** |  |  |  |  |
| **Any Other** |  |  |  |  |

1. **If employed, [Name of the employer, nature of work, total experience, copy of the Sponsorship/No-Objection certificate from the organization/Employer must be enclosed]:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of the Present Employer** | **Nature of Service / work** | **Years of experience** | **List of Enclosures\*** |
|  |  |  |  |

**\* Sponsorship/No-Objection certificate from the organization/Employer**

1. **Full signature of the Scholar with Date:**

**Forwarded with comments by Head of the Dept./Centre Coordinator:**

**Signature of the Head with date:**

**Department of --------------------------------------------------------------------------**

DOCTORAL SCRUTINY COMMITTEE (DSC)

 **FORM -3**

**March 2024**

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The DSC is here by constituted for the doctoral study of the following scholar:

 **Name of the Scholar: Roll No.:**

### Date of Admission /Enrollment:

### Department / Centre:

### Broad Area of Research:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sl.****No.** | **Member / Chairperson** | **Full Name** | **Dept./ Organization** | **Signature** |
| 1. | **CHAIRPERSON**(DRPC / Chairperson DSC Nominated) | HOD (ex-officio / Chairperson DSC Nominated) |  |  |
| 2. | **MEMBER**Concerned supervisor(s)for the research scholar | (i) | (i) | (i) |
| (ii) | (ii) | (ii) |
| 3. | **MEMBER**Two faculty members of the Department having Ph.D. degree [if not available, faculty member(s) from other Department(s) with Ph.D degree] | (i) | (i) | (i) |
| (ii) | (ii) | (ii) |
| 4 | **MEMBER**One non-departmental faculty member of the Institute having Ph.D degree (Nominated by the Dean (Academic)) |  |  |  |

**IT IS CERTIFIED THAT AT PRESENT NONE OF THE SUPERVISORS IS SUPERVISING MORE THAN** 06 **(SIX) Ph.D. STUDENTS.**

Signature of Chairperson, DSC:

Date:

### Dean (Academic)

[*Please attach the CV, consent letter and NOC of the employer from the supervisor, if s/he is not a faculty member of NIT Durgapur. NOC is not required if the supervisor belongs to an institution/organization having MoU with NIT Durgapur*]

COURSES TO BE UNDERTAKEN BY THE SCHOLAR DURING DOCTORAL PROGRAMME

**FORM - 4**

**March 2024**

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1. **Name of the Scholar:**
2. **Roll No.:**
3. **Date of Admission /Enrollment:**
4. **Department / Centre:**
5. **Coursework assigned by the DSC:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Sl.****No.** | **Course Code** | **Name of the subject(s)** | **Signature of the Faculty/(s) offering the Course** |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |

1. **Name and Signature of the DSC Members:**

**Declaration by the DSC:** The DSC members recommend that the above mentioned courses are required for the scholar to carry out the PhD work in the proposed topic / area of work.

|  |  |  |  |
| --- | --- | --- | --- |
| **Sl.****No.** | **Name of the DSC member** | **Role** | **Signature with date** |
| 1. |  | Supervisor /(s) |  |
| 2. |  | Supervisor /(s) |  |
| 3. |  | Member |  |
| 4. |  | Member |  |
| 5. |  | Member |  |

**CHAIRPERSON, DSC**

**Asso. Dean (Academic)**