

## FORM I

### Ph.D., PROVISIONAL REGISTRATION APPLICATION FORM

*Note: Please read the Ph.D., Regulation before filling the Application.*

#### 1. Details of Fee Remittance (To be filled by the Candidate)

Name of the Bank / Branch  
Amount Remitted  
Demand Draft / Chalan Number  
Date of issue / Remittance.

#### 2. Particulars of the Applicant,

Name in Block Letters  
Date of Birth & Age  
Residential Address  
Residential Telephone,  
Mobile  
E-Mail  
Fax

Faculty Candidates  
Designation  
Department  
Name of the Institution  
Address of Institution  
Telephone.  
Fax  
E-mail

#### 3. Academic Qualifications

(Certified Xerox copies of the degrees to be enclosed)

Degree	Name of Degree	Name of the Institution	Name of the Academy	Year of Qualification	Class or % of marks
U.G					
P.G. Diploma					
P.G. Degree					
Higher Specialty Degree					

4. Candidates Academic Distinctions / Publications / Research Experience

a. Awards / Medals / Prizes and Honours achieved during his / her educational period (separate list may be enclosed)

b. Whether the applicant has been a recipient of any Fellowship (UGC / ICMR / CSIR, etc.)

c. Whether the applicant has presented any research Papers / Posters at National / International Conferences / Seminars / Workshops. (Certified Xerox copies to be enclosed)

d. Whether the applicant has any publications / articles to his / her credit in any Accredited Journals. (Certified Xerox copies to be enclosed)

e. Details of any Research Experience already gained (Details of State Research Schemes / ICMR / CSIR projects) (Certified Xerox copies to be enclosed)

5. Details for Provisional Registration for Ph.D., Candidate

i. Candidate Category

A. Non Interdisciplinary

B. Interdisciplinary

ii. Candidate Status

A. Faculty Candidate

B. Non Faculty Candidate

iii Employment Status

A. Employed - Government / Private

B. Unemployed

iv. Research Particulars

1. Subject / field of Research

2. Provisional title of Research

3. Are there similar Research works in the Academy

4. Nature of Research Clinical / Non Clinical / Experimental / Animal Experimental

v. Research Department

1. Name of the proposed department for conducting Research.
2. Has the Department been recognized by this Academy for Ph.D., Research
3. Name of the Institution in which proposed Research work is to be carried out  
Full Address  
Telephone Number  
Fax  
E-mail

vi. Guide

- Name  
Qualification  
Designation  
Address  
Telephone  
Fax  
Departmental E-mail  
If he/she recognised guide by this Academy?  
Residential Address  
Res. Telephone.  
Res. Fax.  
Personal Email

vii. Co-guide

- Name  
Qualification  
Designation  
Address  
Telephone  
Fax  
Departmental E-mail  
If he/she recognised guide by this Academy?  
Residential Address  
Res. Telephone.  
Res. Fax  
Personal Email

6. Details of Certificates / Annexures / Publications

- Name of the attested Xerox copies of the certificate enclosed (separate list may be enclosed)  
Annexures enclosed  
List of publications, if any.

## 7. Certification

### A. Recognized Guides Consent Certificate

I, ....., working as .....  
in the Department of ..... at .....  
.....  
and a recognized guide of JSS Academy, hereby certify that I shall abide by the rules and regulations of the Academy and give my consent to officiate and carry out all the duties of a guide for .....  
..... a candidate who is applying for Provisional Registration for the Ph.D., programme.

Station :	Signature :
Date :	Name :
	Seal :

### B. Recognised Co-guides Consent Certificate (if applicable)

I, ....., working as .....  
in the Department of ..... at .....  
..... and a recognized co-guide of JSS Academy, hereby certify that I shall abide by the rules and regulations of the Academy and give my consent to officiate and carry out all the duties of a co-guide for ..... a candidate who is applying for Provisional Registration for the Ph.D., programme.

Station :	Signature :
Date :	Name :
	Seal :

### C. New co-guide Consent Certificate (if applicable)

I, ....., working as ..... in  
the Department of ..... at .....  
..... hereby certify that I shall abide by the rules and regulations of the Academy and give my consent to officiate and carry out all the duties of a co-guide for .....  
..... I have also submitted all my papers and the application form as per the rules and regulations seeking recognition as a co-guide in this Academy.

Station :	Signature :
Date :	Name :
	Seal :

**D. No objection certificate from the Head of the Department**

Consent is hereby given to ..... to carry out Research Work in the Department of ..... It is a recognized department for Ph.D., Research work in JSS Academy. The Department agrees to offer all necessary facilities for carrying out the Research Work for the above mentioned candidate.

There is no objection for the above mentioned candidate to do the research work in this department.

Station:  
Date :

Signature:  
Name :  
Seal :

**E. No objection certificate from the Head of the Institution**

Consent is hereby given to ..... to carry out Research Work in this Institution which is a constituent college of JSS Academy.

Name of the Institution.....

There is no objection for the above mentioned candidate to do the research work in the selected department of this institution.

Station :  
Date :

Signature :  
Name :  
Seal :

**F. Ethical Committee / Animal Ethics Committee / Clearance Certificate**

We, the Undersigned Chairman/Members of the Ethical Committee, functioning in ..... have studied the proposed research Subject/Project of ..... a candidate applying for provisional registration and hereby give the certificate of clearance of approval by this Ethical Committee.

Station :  
Date :  
Signature of the Chairman/ Members of the Ethical Committee  
Name of the Institution:  
Seal :

### **G. Declaration by the Candidate**

I, ....., a candidate applying for Provisional Registration for Ph.D., in JSS Academy hereby certify and declare that all the particulars furnished in this Provisional Application are true and correct. In case any particulars given in the application are found to be incorrect at any stage and any discrepancies that may be noticed at any time of the Research Programme inclusive of discrepancies in the Title, Synopsis and Thesis, I agree to forfeit my candidature no matter at what stage I will be in at that time.

Station :

Signature :

Date :

Name :

### **Instructions to the candidates**

1. Read the Ph.D., Regulations of this Academy before filling the applications form.
2. All entries in the provisional registration application must be written neatly and legibly by the candidate in his / her own handwriting in blue / black ink or neatly typed
3. Only one application should be submitted by each candidate
4. All the particulars required in the provisional registration application form should be furnished without any omission.
5. Incomplete filled applications will be deemed as rejected application
6. Candidates are specifically requested to note that error, overwriting and corrections, if any in the certificates are duly attested by the authorities concerned before submitting them.
7. The prescribed fees should be paid in the form of demand draft drawn in favour of “Fee Account, JSS University” payable at “Mysore”.
8. As prescribed by the Academy from time to time.

**JSS Academy of Higher Education & Research**  
**Ph.D., REGULATIONS**  
**FORM II**  
**Ph.D., Recognized Guide Particulars Form**

(To be filled by the Recognized Guide only and submitted along with the Provisional Registration form of the Candidate)

1. Name of the guide
2. Date of birth and age
3. Qualifications
4. Designation
5. Official Address  
Telephone  
Fax  
E-mail
6. Residential Address  
Telephone  
Fax  
Mobile  
E-mail.
7. Recognised guide of this Academy  
(Enclose certified Xerox Copy of recognition).
8. No. of candidates already  
guided and who have received  
Ph.D., Degree

**9. Details of candidates currently Registered**

Sl. No.	Name of the candidate	Date of Registration & Session	Date of Methodology Exam	Date of submission of synopsis	Provisional title of thesis	Area of Research
1						
2						
3						
4						
5						
6						

\*As per JSS Academy Regulation, each Guide can register only 6 Candidates.

I shall abide by the rules and regulations of the Academy

Date :  
Station:

Signature:  
Seal :

# JSS Academy of Higher Education & Research

## Ph.D REGULATIONS

### FORM III

#### Ph.D., Recognised Co-guide Particulars Form

(To be filled by the Recognised co-guide only and submitted along with the Provisional Registration form of the Candidate)

1. Name of the Co-guide
2. Date of Birth & Age
3. Educational Qualifications with date and year of passing
4. Designation
5. Official Address  
Telephone  
Fax  
E-mail.
6. Residential Address  
Telephone  
Fax  
Mobile  
Personal E-mail.
7. Willingness to officiate as co-guide
8. Previous Experience as co-guide

#### 9. Details of candidates currently Registered

Sl. No.	Name of the candidate	Date of Registration & Session	Date of Methodology Exam	Date of submission of synopsis	Provisional title of thesis	Area of Research
1						
2						
3						
4						
5						
6						

\*As per JSS Academy Regulation, each Co - Guide can register only 6 Candidates.

10. If willing to officiate as a co-guide for the first time, whether the applications for Registration as a co-guide has been submitted in FORM IX as mentioned in the Ph.D., Regulations.

I shall abide by the rules and regulations of the Academy

Date : \_\_\_\_\_ Signature

Station: \_\_\_\_\_ Seal