



Registration
Form No.

Avinashilingam Institute for Home Science and Higher Education for Women

(Deemed to be University under Category 'A' by MHRD, Estd. u/s 3 of UGC Act 1956)
Re-accredited with 'A' Grade by NAAC. Recognised by UGC Under Section 12 B
Coimbatore - 641 043, Tamil Nadu, India

APPLICATION FOR REGISTRATION FOR THE DEGREE OF Ph.D.

For Office Use

FULL - TIME	PART - TIME		
	TEACHING / NON TEACHING		
To be filled by the candidate			
Amount in ₹			
Date of Payment			
Demand Draft No.			
Name of the Bank / Branch			
1.	Name of the Applicant (as entered in the degree certificate) (IN CAPITAL LETTERS)	In English	
		In Tamil	
2.	Father's name Mother's name		
3.	Date of birth	Sex	Male / Female
4.	Community OC / BC / MBC / SC / ST	Nationality	Indian / Foreign
5.	Religion	Hindu / Muslim / Christian / Others	
6.	Address for Communication	Phone :	
		E-mail id :	
		Mobile :	
7.	If part-time, furnish Designation with Office address of the College / department wherein she is working		
8.	Educational Qualification particulars	PG	M.Phil.
i.	Major subject/s		
ii.	Register No.		
iii.	Month & Year of Passing		
iv.	Month & Year of Convocation		
v.	College / University		
9.	Whether the candidate is undergoing any other programme in this University or in any other University?		
10.	Address of the Department of this University / Recognized Research Institute where the applicant proposes to conduct Research		

11.	Whether the applicant has obtained permission to do Research?			
12.	Whether the applicant has obtained any sponsorship from funding agencies?			
13.	Date of joining the Research Department / College / Institution			
14.	Broad field of Disciplinary / Inter-disciplinary Research (Candidate's PG degree-Name of the Department - Interdisciplinary)			
15.	Signature of the Applicant			
16.	Name and designation of the Supervisor			
17.	Number and date of communication in which Supervisor has been recognized as Ph.D. guide			
18.	Date of Superannuation of the Guide			
19.	Scholars currently doing research under the supervisor :			
S.No.	Name of the Scholar	Month & Year of Registration	Full-time or Part-time	Fellowship, if any
i.				
ii				
iii.				
iv.				
v				
vi.				
vii.				
viii.				
ix.				
20.	Signature of the Supervisor	Signature of the Co-guide		
21.	Signature of the Head of the Department / Institution / College where Research will be carried out			
22.	Signature of the Head of the Institution (If, the applicant is working)			

Preserve Xerox copies of all fees payments regard to Ph.D.

Enclosures to be attached :

- Demand Draft for 500/- in favour of 'The Registrar, Avinashilingam Institute for Home Science and Higher Education for Women, Coimbatore'.
- P.G. / M.Phil. Convocation degree in original.
- Transfer Certificate in Original.
- Copy of the permission letter to do Ph.D. Research if affiliated / Institute sponsor candidate.
- Certificate of Recognition, in case of candidates who have qualified from other Universities.
- Copy of the Joining Report duly forwarded by Supervisor / Principal / HOD.