Application for University Presentation of Ph.D. Protocol

(Dr T.M.A. Pai Scholarship, Self-sponsored category and

candidates from Integrated PhD program)

*(Please type information; hand-written applications will not be considered)*

|  |
| --- |
| Personal Data |
| Name (in block letters) |  |
| Date of Birth (DD/MM/YYYY) |  | Affix your recent passport size colour photograph |
| Gender | Male Female |
| Phone  | Residential |  |
| Mobile |  |
| E-mail |  |
| Name of the Father |  |
| Name of the Mother |  |
| Religion |  | Caste: |  |
| Nationality |  | Blood Group |  |
| Mother Tongue |  | State of Domicile |  |
| PhD Admission Number |  | Department  |  |
| Marital Status |  |
| Spouse Name (If marital status is Married) |  |
| Spouse Phone |  | Spouse Email |  |
| Residential Address with pin code |  |
| Office address with pin code |  |
| Address for Correspondence | Office Residence |

|  |
| --- |
| Academic Record (Bachelor’s degree onwards) |
| Examination Passed | Specialization | Institution | University | Year of Passing | % of Marks obtained |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| National Level Entrance Examinations Qualifying for PhD |
| If Qualified, Name of the Entrance Examination: | Year of Passing: |
| *Attach the relevant document* |
| Proposed Research Data |
| Title of Proposed Thesis: |
| Department and Institution in which the candidate proposes to work and prepare thesis: |  |
| I hereby declare that the information that I have furnished herein is true to the best of my knowledge. |
| Date:Place: **Signature of the Candidate** |

|  |
| --- |
| Declaration by the Guide |
| Name of the Guide: |
| Designation: |
| Office Address: |
| Phone: |
| Email: |
| Senate approval reference number or guide number: |
| The students who are presently admitted for PhD course with me are: |
| Sl. No. | Name of the student | Registering University | Date of admission | As Guide/Co-Guide |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| I undertake the responsibility of guiding Ms./Mr. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_for her/his PhD degree in the proposed field of research. |
| Date:Place: |
|  **Signature****Note**: *Guide is permitted to supervise 2 candidates per academic year and a maximum of 8 candidates at a time.*As co-*guide one can supervise 2 candidates per academic year and a maximum of 8 candidates at a time.* |
| Declaration by the Co-Guide |
| Name of the Co-Guide: |
| Designation: |
| Office Address: |
| Phone: |
| Email: |
| Senate approval reference number or guide number: |
| The students who are presently admitted for PhD course with me are: |
| Sl. No. | Name of the student | Registering University | Date of admission | As Guide/Co-Guide |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| I undertake the responsibility of guiding Ms./Mr. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_for her/his PhD degree in the proposed field of research. |
| Date:Place: |
|  **Signature****Note**: *Guide is permitted to supervise 2 candidates per academic year and a maximum of 8 candidates at a time.*As co-*guide one can supervise 2 candidates per academic year and a maximum of 8 candidates at a time.* |
| Recommendation of the Head of the Department |
| The Department of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Institute has adequate facilities for conducting the research work byMs./Mr. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Under the guidance of Dr. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| I recommend that the candidate may be permitted to take admission for PhD Course underManipal Academy of Higher Education. |
| Date: Name:Department Seal: Signature:  |
|  |
| Recommendation of the Head of the Institution |
| The Department of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Institute has adequate facilities for conducting the research work byMs./Mr. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Under the guidance of Dr. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| I recommend that the candidate may be permitted to take admission for PhD Course under Manipal Academy of Higher Education. |
| Date: Name:Institution Seal: Signature:  |

|  |
| --- |
| PASSPORT and VISA DETAILS(for foreign students only) |
| **PASSPORT DETAILS:** |
| Passport Number: |  |
| Issuing Authority: |  |
| Issue Place and Country: |  |
| Issue Date: |  |
| Expiry Date: |  |
| **VISA DETAILS:** |
| VISA Number: |  |
| Issuing Authority: |  |
| Issue Place and Country: |  |
| Issue Date: |  |
| Expiry Date: |  |

|  |
| --- |
| INSTRUCTIONS |
| **The University PhD protocol Application duly filled must be submitted to the Research Coordinator of the respective institution along with the following enclosures:**1. Application form
2. Attested copy of the Bachelor’s and Post Graduate degree certificate.
3. Attested copies of the mark’s cards of Bachelor’s and Post Graduate degree
4. Copy of the Grant sanctioned, JRF selection letter, competitive examination score card (if any)
5. Admission order copy
6. Proof of Identify (Aadhaar copy)
7. Affidavit and Newspaper notification details for change of name (if any)
8. Evidence for Institutional presentation
9. DAC Form/recommendation duly signed by HOI/Chairman
10. DAC Committee Members List (.doc)
11. Details of course work suggested by the DAC (12 credits)
12. Check list duly signed by the Candidate and the Guide/Co-Guide
13. EC/IAEC/bio-safety or any other approval letters or evidence of submission for approval
14. Research protocol Soft copy (pdf)

Hard copy of the above-mentioned documents must be submitted with a covering letter and through proper channel to: **The Deputy Director** **Centre for Doctoral Studies,**  **Directorate of Research** **Ground Floor, Advanced Research Centre** **Manipal Academy of Higher Education  Manipal-576104 |Karnataka |India Tel: +918202922017** |

|  |
| --- |
| INSTRUCTIONS |
| **Research protocol should include the following in the format, all 15 sections mentioned below are mandatory**:1. Title, Candidate 's Name and affiliation
2. Guide/Co-guide's name and affiliation (Guides/co-guides should be registered/approved guide of MAHE)
3. Introduction
4. Literature Review
5. Research Gaps identified
6. Objectives
7. Detailed Methodology
8. Expected outcome
9. Importance of proposed research investigation
10. Research Time plan
11. Pilot study / Preliminary work done
12. Details of Expenses and source of funding (detailed break-up of research related expenses for consumables/software/equipment/travel etc. to be given along with details of source of funding. If the study does not require funding, same to be mentioned with justification. Scholarships/fellowships awarded to the candidate should not be mentioned under research related expenses mentioned above.
13. References
14. Course work details suggested by DAC with credits
15. Similarity check report having *total word count, index < 15% and exclude Matches<3* duly signed by the candidate and guide
 |

|  |
| --- |
| FOR OFFICE USE ONLY |
| Admission Number: |
| Date received:  | Date of acceptance for University presentation after screening:  |
| University presentation date:  |  |
| **Documents Verified Status:**  | YES | NO | NA |
| Attested copy of the Bachelor’s and Post Graduate degree certificate |  |  |  |
| Attested copies of the mark’s cards of Bachelor’s and Post Graduate degree |  |  |  |
| Valid photo identity document (Aadhaar) |  |  |  |
| Affidavit and Newspaper notification details for change of name (if any) |  |  |  |
| Copy of the Grant sanctioned letter (if any) |  |  |  |
| National Eligibility test results (if any) |  |  |  |
| Admission order copy |  |  |  |
| Evidence for Institutional presentation  |  |  |  |
| DAC details |  |  |  |
| DAC recommendation |  |  |  |
| Checklist |  |  |  |
| Number of candidates under Guide |  |  |  |
| Number of candidates under Co-Guide |  |  |  |
| Section of protocols  |  |  |  |
| EC/IEC/bio-safety or any other approval  |  |  |  |