INDIAN INSTITUTE OF TECHNOLOGY KHARAGPUR

Application for Registration to IITKGP-University of Joint Doctoral Program

Instructions for filling this form:

✓ Please treat all fields as mandatory. Incomplete application will not be considered. In case any field is not applicable then please put 'NA'.

1. APPLICANT'S DETAILS: Please provide your name and date of birth as per your passport.

Name (as in ID card)	
Date of Birth	
Place of Birth	
Nationality	
Photo ID Proof	(Please attach/Enclose)

2. Dept./School/Center Details:

D/S/C	
Applicant Roll No.	
No. of months spent in the Ph.D Programme at	
IITKGP	
Name of PI	
Email ID of PI	
Contact Number(s) of PI	

2. APPLICANT'S CONTACT DETAILS: Please provide your current email and phone details

IITKGP Email Address	
Alternate Email Address (if any)	
Contact Number (with country	
code)	
Alternate Contact Number	

Please provide your current mailing address:		
Country		
Address Line 1		
Address Line 2		
Address Line 3		
Suburb/Town		
State		
Postcode		

3. ACADEMIC QUALIFICATIONS/ EDUCATIONAL DETAILS: Start with most recent. Please include any ongoing programme

Sl no	Name of the Degree/ Exam	School/ College/ University	Year of completio n/expected	GPA (or equivalent)	Maximum GPA scale (or equivalent)	Major/ Specialisation/ subjects	Transcripts / Grade Card
1.							Attach
2.							Attach
3.							Attach
4.							Attach
5.							Attach

5. ACADEMIC PUBLICATIONS: YOU MAY ADD MORE ROWS IF REQUIRED

Sl. No	Title of Conference Paper/ Journal Paper/ Book Chapter/ Book	Author(s)	Publication Details (Publisher, Volume no., Pages, Year)

7. ADDITIONAL DETAILS OF YOUR STUDY AT IIT KHARAGPUR:

Project	Details
Proposed Title	
Research Topic Description (Maximum 300 words)	
Statement of Purpose (Maximum 750 words)	Attach/Enclose

8. Have you identified a potential mentor/supervisor at the Partner Institute?

YES _____ NO _____

If you have answered YES to the Q# 8 above please provide details

University of	

Principal Supervisor	
Contact information	

9. Please provide names and contact of 2 referees:

1.	
2.	

DECLARATION

All Information shared by me is complete and correct to the best of my intention. I understand that falsifying any information may result in my application for registration to the JDP being cancelled.

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Student Name and signature