

## RANI DURGAWATI UNIVERSITY JABALPUR (NAAC "A" Accredited) RDVV DET-2025

## **Candidate Information Form**

1.	(June/D	<b>Dec)</b> 2024/ CSIR UG ry:	Recent Color Photo							
2.	_	)25 Roll Number (I								
		<b>::</b>								
4.	Faculty	•								
5.	Name o	of Candidate:								
6.	Date of	Birth:								
7.	Gender (Male/Female/Others):									
8.	Enrollment no (If already enrolled in RDVV)									
9.	Category (UR/ST/SC/OBC/EWS):									
	(Attach Caste/Domicile Certificates/Income Certificate in case of OBC NCL)									
		· ·	Out of MP):							
11				2024)/Valid JRF Score Card						
43		• , .	opy of Score card): If Yes attach Cert	::f:						
		g(Yes/No): relevant certificate								
13	S. No.	Class	Subject/Course name	Board/College/University	Dorsontage of Marks					
	1	X	Subject/ Course name	Board/College/Offiversity	Percentage of Marks					
	2	XII								
	3	Graduation								
	4	Post-Graduation								
	5									
	6									
10	s. Corresp	Johnsence Address.								
19	). Permar	nent Address:								
20	). Workin	g Presently?								
	If yes, p	olease attach NOC	from employer							
	of Propo	sed Supervisor/Co	-supervisor							
Design	nation an e No. and									
Design	nation an e No. and									
Design										
Desigr Mobile	e No. and	l Email Id								



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## No Objection Letter (CONSENT FORM) (To be obtained from Supervisor/Co-supervisor)

A. Scholar's Details												
DET-2025 Application ID/F	Legistration ID form MP				Subject							
Online under DET/UGC-NE												
UGC NET (July/Dec) 2024 / Exam Category	Valid JRF Score Card											
Name of the Candidate					Faculty							
Category(UR/ST/SC/OBO		icate if helongs t	o SC/ST/O	DBC/EWS along with domicile c	ertificate							
Mobile No:	by or easter category certific	Email ID-										
Working Presently. If yes,	, please attach NOC fro	m employer YES/NO										
B. Supervisor's/Co-supervisor Details												
Total number of registered	PhD candidates as Sup	pervisor/Co-su	pervisor			-						
	Subject		Supervisor/Co-supervisor									
1												
2												
3												
4												
5												
6												
7												
8	_											
Name of Supervisor and Address of the college/UTD												
Present post held(Profes	sor/Associate	Date of Superannuation										
Prof/Assistant Prof)												
Working Presently at Gov	Whether registered w											
IfPrivate,pleaseattachC selection letter		Universities ?If Yes, Number of registered Candidates with other Universities.										
Email id			Mobile No.									
Name of Co-Supervisor and Address of the College/UTD/Institute												
Present post held (Design	ation)		Date of Superannuation									
Working Presently at Gov	·			Whether registered								
Institute. If Private Colle	ege, please attach			Universities? If Yes, Number of registered Candidates with other Universities.								
Code28 selection letter Email id			Mobile No.	Universities.								
Lindina				Widding IVO.								
Name of Propose	ed Research Centre											
•												
I/We hereby provide my	our consent to serve	as superviso	r/co-sup	pervisor for the candidate	e. I/ We do not have	any objection if						
the aforesaid mentioned	candidate is allotted	to me/us by	the Rese	earch Advisory Committe	e for Ph.D. under m	y/our Supervision						
/Co-Supervision:												
Signature of Candidate	visor Sign	sor Signature of Co-supervisor(If any)		Signature of the Head of the Proposed Research								

Centre

Note: 1. Selecting a Co-supervisor is not mandatory.

2. All required annexures must be attached.