

JAWAHARLAL NEHRU TECHNOLOGICAL UNIVERSITY ANANTAPUR ANANTHAPURAMU 515 002, A.P.

APPLICATION FORM FOR Ph.D. PROGRAM for INDUSTRY/RESEARCH PROFESSIONALS/PUBLIC REPRESENTATIVES

(Please go through the information to the candidates and guidelines before filling up the application form)

Name of Constituent Unit/ Research centre to carry out Research work (For Part-time Ph.D., only Constituent Unit shall be selected) Note: The candidate has to select the Unit where his/her area of Specialization is available. Name (In block letters): Father's/Husband's Name Address: (Please give the mobile number to which SMS is to be sent) C-mail ID: (Please write the e-mail address correctly and legibly) Date of Birth: Gender: Category: Onte Month Year Male Female OC BC-A BC-B BC-C BC-D BC-E SC	Part Time/ Full Time	Area of Res	earch			1	atest Passp photograp	
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Name of the Degree	Specialization		College ere studied	J	Jniversit	у	Year passing Divis	with	Aggregate Percentage
(Parti	s of employment: culars of employment of application shall be					qualif	ying exa	aminat	tion till last
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				FIOIII	10				
7. Title	of Research work:_								
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and I	e to supervise the profurther certify that I me as Supervisor at p	have							oursuing

Signature: Name:

Designation: office Seal:

Date: Place:

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9.	
(i) For Executives working from Central & State Go	ovt. Organizations
a) Name of the Organization presently working	:
b) Experience in years & months	:
c) Designation/ cadre	:
(ii) For Scientists/ Scientific Officers working in Sta	ate Government/Central Government
Research Organizations	
a) Name of the Organization presently working	:
b) Experience in years & months	:
c) Designation/ cadre	:
(iii) For Executives working in Private Organizations	s/ Industries/ R&D Centers of Private
Companies:	
a) Name of the Organization presently working	:
b) Experience in years & months	:
c) Designation/ cadre	
d) Last Financial year turnover of the organization (enclose signed proof)	:
(iv) For Member of Parliament (M.P), Member of L	Legislative Assembly (M.L.A) and
Member of Legislative Council (M.L.C)	
a) MP/MLA/MLC	:
b) Name of the Constituency	:
(enclose proof)	
10. Declaration by the candidate:	
I certify that the above information is true to the bany stage, my admission may be cancelled.	best of my knowledge. If found false at
Date:	
Place:	Signature

NO OBJECTION CERTIFICATE

(This Certificate is to be signed by the Head of the Office/Organization) (Other than Public Representatives Only)

This is to Certify that Shr	i/Smt/Kum		
Son/Daughter/wife of			a candidate
applying for admission i	nto Ph.D. Full Tin	ne/ Part Time course of	JNTUA is currently
employed in Full-Time se	ervice as (Designat	ion)	
in our organization.			
The details of his / her en	nployment are give	en below:	
1. Name and Address of	the Organization	:	
2. Status of the Organiza	tion	-	Public Sector Undertaking/
3. Date of joining the Or	ganization	:	te Sector Enterprises
4. (a) Present position an	d date of appointm	nent/promotion to this p	post :
 6. This Office/Organization Time / Part Time prog (i) Certificate in case Our organization of the entire duration 	tion has NO OBJI ram of JNTUA. of Full Time cand will relieve the can	ECTION to sponsor the didate: Ididate to pursue the fulther candidate submits the candidate submits submits the candidate submits s	YearsMonths The candidate to join Ph.D. Full Il time Ph.D. in JNTUA for the thesis.
Our organization (6 months) by reli	will permit the can eving him/her duri	didate to pursue the co	ursework for the period so, the candidate will be ever needed.
Place :	2. Designation		re of Head of the Organization Seal of Office

^{*}Private Sector Organisation shall furnish documentary evidence for recognition such as GST Registration, Industry license. Approval/license from concerned Government or Public Sector Departments.