

OPJS UNIVERSITY

Established by Act No. 33 of 2013 Rajasthan State Legislature & Approved by UGC under Section 2(F) of the UGC Act, 1956

VPO – Rawatsar Kunjla, Near Sankhu Fort,Rajgarh (Sadulpur) -Jhunjhunu Road, Churu – Rajasthan. Email ID: rd@opjsnuniversity.edu.in | Website: www.opjsuniversity.edu.in Contact: 8266963445

APPLICATION FORM FOR RECOGNITION OF CO-SUPERVISOR (Co-Guide) FOR Ph.D. IN THE

FACULTY OFSUB	JECT
To, The President, OPJS University Rawatsar – Kunjla Rajgarh – Jhunjhunu Road Rajgarh (Sadulpur) Churu , Rajasthan , India – 331303	QHOO
Sir/ Madam,	
I hereby apply for acquiring recognition as a Co-State Faculty of Subject	
1) Name in full :	(In Block Letters)
2) Name of Father/ Husband:	
3) Date of Birth :	
4) Gender :	
5) Permanent Address:	
6) Address for Correspondence:	
Contact :Email :	
7) Nationality :	

0) Acader	nic Record f	rom 10th onward	ls: (Attach	copies of	markshe	et, certificato	es):
Name of the examinations	Examinations Passed	Name of Institute/ University	Major Discipline	Year of Passing	Total Marks Obtained	(%) Marks/ CGPA	Remarks if any
l) Topic o	of the Ph.D. T	Thesis with specia	llization :				

Under Graduate

Total

From

To

From

Under Graduate

To

Total

8) Mother Tongue :_____

Institute/ University

	(I) Total Research Experience (Years):										
	(II) Number of Parts Papers Published:										
	(III) No. of Book authored:										
	(IV) Number of Books/ Journals edited :										
(13)	Det	ails of Confe	rence	es/ Seminars/ Work	kshops :						
	Year Conferences/ Seminars/ Workshops attend Title of Paper Presented										
(14)	Aw	ards and Rec	ognit	ions:							
(15)	Ado	ditional Info	rms, ii	f any :							
(-)			-,	- J							
Plac	e :										
		Required:									
		_	nort S	ize Photogranh							
	 Latest Coloured Passport Size Photograph. Copy of all the certificates i.e. Matriculation, 10+2, Graduation, Post-Graduation, Ph.D. 										

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3. Aadhar Card, PAN Card

I confirm that the information given in this form is true, complete and accurate and none of the Information requested or other material information has been omitted. I accept if it is discovered that I have supplied false, inaccurate or misleading information, OPJS University reserves the right to withdraw my services and I shall have no claim against OPJS University in relation thereto.

Please e-mail the application form to rd@opjsnuniversity.edu.in

Email ID: rd@opjsnuniversity.edu.in | Website: www.opjsuniversity.edu.in

Contact: 8266963445,8265963445