



MOTHER THERESA POST-GRADUATE & RESEARCH INSTITUTE OF HEALTH SCIENCES (MTPG & RIHS)

(Government of Puducherry Institution)
Indira Nagar, Gorimedu, Puducherry-605 006

Permanently affiliated to Pondicherry University & Approved by UGC u/s 12 (B) & 2(f), PCI & AICTE

Phone: 0413-2271200, 2275566, 2273008; Fax : 0413-2277594

Website: <http://mtihs.puducherry.gov.in>

APPLICATION FOR ADMISSION TO DOCTOR OF PHILOSOPHY (Ph.D.) IN PHARMACY (FULL TIME INTERNAL) – 2016-17

(FOR OFFICE USE ONLY)

Registration No. :

Marks obtained in Entrance Exam : Merit Rank :

Category in which selected :

Date:

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Note: Read carefully the Information Brochure before filling up the application form.

1. Name of the Candidate :

2. Father's Name :

3. Date of Birth :

Date		Month		Year	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

4. Nationality :

5. Address for communication :

Pin Code

6. (a) Contact Telephone No. :

(b) Mobile Number :

(c) E-Mail ID : @

Affix recent passport size photograph and self-attest it.

7. Community (SC/ST/ GEN etc.) :

8. Academic Record :

Sl. No.	Exam passed	Year of Passing	College / University	Class	% of Marks
1.	B.Pharm				
2.	M.Pharm*				
3.	Competitive Exam passed – GPAT/ CSIR/ ICMR				
4.	Title of M.Pharm. Thesis				

9. (a) Broad area of Research (enclose a brief synopsis (500 words) of proposed research) : _____

(b) State whether the field of your research is interdisciplinary : Yes / No
 If yes, mention the disciplines involved : _____

10. State whether you have already registered for Ph.D. Degree in any University : Yes / No

If yes, give details
 (a) Date of Registration : _____

(b) Title of the thesis : _____

(c) Name of the College /University : _____

(d) Reason for fresh Registration : _____

11. No. of Papers published in Indexed Journals :
 (Enclose the list of papers published in Indexed journals)

12. Scientific Papers presented in Conferences/ Seminars/ Workshops :

13. State whether you are pursuing any other course of study leading to any Degree / Diploma or Certificate. If so, give details. :

14. List of Enclosures

1. Demand Draft for application : Amount : _____
Bank Name : _____
Draft No. : _____
Date : _____

- 2. Self-attested copy of PG Convocation Certificate.
- 3. Self-attested copy of Competitive exam certificate & score card.
- 4. A brief synopsis (of about 500 words) of the proposed research work.
- 5. Recognition Certificate (For candidates other than Pondicherry University)
- 6. Service Certificate in case applicable (Relieving letter have to be produced on the date of joining the course.)

DECLARATION BY THE APPLICANT

I hereby declare that the particulars furnished in this application are true and correct to the best of my knowledge and belief. In case, any particulars furnished in this application are found incorrect, I agree to forfeit my registration no matter at what stage of the course, I will be at that time. I shall abide by the rules and regulations of the Mother Theresa Post Graduate and Research Institute of Health Sciences, Puducherry.

Place:

Date:

Signature of Applicant

CHECK LIST

Attach the self-attested copies of following certificates / documents with the application. (Tick [✓] the relevant boxes)

				<i>To be filled by</i>		
				(For Office use)		
Applicant				Scrutinizing Officer	Verifying Officer (counselling)	
1.	Birth Certificate or any Certificate for proof of Date of Birth	:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Puducherry UT Residence / Nativity Certificate – Recently issued / Revalidated for 2016	:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Nationality Certificate	:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Caste / Community Certificate- Recently issued/ Re-validated for 2016	:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	B.Pharm. Degree Certificate	:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	M.Pharm. Degree / provisional Certificate	:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Statements of marks of qualifying examinations (All Semesters/years): _____ Nos.	:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	Transfer Certificate & Conduct Certificate issued by the Head of Institution last studied	:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	Crossed Demand Draft for ₹.1000/- towards Application Fee	:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.	Any other relevant certificates.....	:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.	Medical Fitness Certificate issued by Competent Authority	:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	<i>Applicant</i>	<i>Scrutinizing Officer</i>	<i>Verifying Officer during counselling</i>
<i>Signature of the :</i>			

(FOR OFFICE USE ONLY)

<i>Sl. No.</i>	<i>Remarks of Scrutinizing Officer</i>	<i>Remarks of Verifying Officer during counselling</i>
1.		
2.		
3.		
4.		

Received back all the original certificates on _____.

Signature of the candidate.



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HALL TICKET – MTIET (PH.D.)–16

ENTRANCE TEST

(For Admission to Ph.D. in Pharmacy Course)

Affix recent passport size photograph and self-attest it.

Registration No.	
Name of the Candidate	
Name of the Centre	Mother Theresa Post Graduate & Research Institute of Health Sciences, Indira Nagar, Gorimedu, Puducherry-605 006
Date & Time of Examination	10-09-2016 (Saturday) at 11:00 a.m. (Duration: 100 minutes)
Signature of the Candidate	

Note : If the Candidate does not fulfill the eligibility criteria and does not produce the requisite certificates at the time of counselling, he/she shall forfeit the right of selection without any further correspondence though he/she might have appeared for the Entrance Examination.

(DR. R. MURALI)
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