Application No :	
Handbook No:	

			(Unive N. M. Par 22-3361-1111 APPLI	rsity Un ekh Ma / 2222 Fa Website: CATION Ph.D	nder Sectio rg, Matung xx: 91–22–33 www.ictmun N FORM FO . (Tech.) / Pl	nbai.edu.in R ADMISSI	C Act 1956) – 400 019 il: admission ON TO)	
			the format o	D of Govern	ept.: nment of Ma	harashtra			Affix your recent passport size Photograph (not
· · ·	NAME : In Block L	etters)	Surname/	Family No	 ame	First Name	Father	's/Husband's Name	older than 6
(b)	Name Ap	pearing on		r's name ocument		/Board/ Jr. C	ollege/Unive	rsity Certificates	
2. D	ATE OF E			(yyyy)	Place of Birth		State		
						STATUS: Mai OMICILE ST		Single	FOR OFFICE USE ONLY
			ESPONDEN						(Applicant shall not write Anything in this space)
Villag	re/Town/C	tv-	Та	luka:-		District			
-		•							
						Mobile No			
6. P	ARENT'S	/ GUARDI.	AN'S NAME	& ADDI	RESS:				
Village	e / City:		Talu	ıka:		Distri	ct:		
State _ STD C	Code:		Pin Code _ Phone	No:		Mobile 1	No		
7. (a)	Applicant	's E-Mail ac	ldress:						
	Religion		: Cint / Guardia						Whether admitted
	-	Please √ in a	appropriate bo	ox)					
Open	SC	ST	VJDT-A	NT-B	ONLY FRO NT-C	M MAHARA	ASHTRA OBC	SBC	YES NO
10. Master	Details o rs Degree i		fying Examin 			lity Certificate	es from comp	etent authorities)	Provisional Confirmed Any Fellowship available YES NO Name of Fellowship
Colleg Univer	e/Institutic								Receiving Date
			·						
	E/GPAT/ot					Member of IC			Receiver's Signature
									Signature of Head of the Department
3								(P.T.O.)	, ,
Applic									No
									, MUMBAI- 400 019.
Receiv Date _	ea an appl	ication for a	umission to F	n.D. (Sci	i. / I ech). Deg	gree course fro	om Shri/Smt.		

(Receiver's Signature) NB: Please enclosed a self –addressed envelop (22 X 10 cm.) bearing Rs.5/- stamp for receiving the acknowledgement by post.

12. Family Data: - (Excluding yourself)

No.	Name of Family Member	Date of Birth	Education	Current Occupation	Approx. Annual Income, Rs./\$
1					
2					
3					
4					
5					
6					
7					
8					

13. ACADEMIC RECORD:

Examination	Board / University	Months & Year of Passing	Total Marks Obtained	Maximu m Marks	% Marks	Class	Name of College/Institute
SSC / Std. X /Equivalent		U					
XII std. H.S.S.C. or Equivalent							
B.Sc., /B.E. /							
B.Chem.Engg./B.Tech/ or Equivalent							
Part I - M.Sc. / M.E.							
/M.Chem.Engg/M.Tech/ M.Pharm							
Part – II or Thesis							

*GATE / GPAT /SET / NET / other (Attach attested copies of all the Statement of Marks)

9. Account for academic break (if any)

10. Academic /Industrial Experience, (if any) (Mention position held, period and Organization, Institute)

11 Other outstanding achievements, (if any):_

12. List of Reference with complete Addresses (Write names of three persons who can evaluate you technically or who have supervised/taught you)

13. Documents to be attached: - Refer Table 5 in the Handbook

14. DECLARATION

Place ____

I have read the instructions given in the Prospectus carefully before filling up this form. The information given above is true, complete and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect, my admission may be cancelled without any notice. If admitted, I shall abide by all the rules, regulations and discipline of the Institute. I shall not involve myself in any ragging or anti-social activities which will not only tarnish my own record but also the institute's image and if I come to know any such incidence, I shall report it to the authorities. I will also submit the undertaking regarding the anti-ragging measures, once admitted.

	Date					
				Signatu	re of Applicant	
	OFFICE USE ONLY:		2			
1.	Research Supervisor's Com	ments	3	Financial support to the C	andidate	
	New student			Fellowship agency		
				With / Without HRA		
	Already guided			Decease Cabama		
	Guidance Available			Research Scheme		
	Guidantee Tranacie			Remarks		_
	Guidance not available			Cionatura and Data		
2	Current enrolment with the generation of the second	guide		Signature and Date		
	Masters:		4.	Remarks by office		
	Doctoral:			Admitted / Not Admitted, Date:		
	Total :					
				Fees Receipt	Date	
				Deposit Receipt		
				Date		
		Remarks by Dire	ector: Approved			

Signature & Date

Please read very carefully all instructions given in the Prospectus before filling up this form and submit the completed form before the last date. Any misrepresentation of records or over-writing on official documents will lead rejection of the application form.