

(Formerly Indira Gandhi Institute of Technology)

Kashmere Gate, Delhi-110006

Guidelines for applicants selected for Provisional Admission to Ph.D. Programme-2019

- 1. Selected applicants shall fill and submit the "Application Form for Provisional Registration to Ph.D Programme-2019" is attached at (Annexure "A")
- 2. The applicants shall report to Room No 111 & 112, Administrative Block, at 9:30 am on 30th July, 2019 along with the following documents:
- 3. All Original Documents for verification including Date of Birth Certificate (Class X certificate), UG and PG Degrees, UG and PG Marksheets, GATE SCORE CARD/NET Certificate.
- 4. Original and self attested copy of Caste/ Category certificate (for the reserved categories only) issued by one of the following authorities of competent jurisdiction: (Annexure "B")
 - A. District Magistrate/ Additional District Magistrate/ Deputy Collector/ 1st Class Stipendiary Magistrate/ Commissioner City Magistrate (not below the rank of 1st class stipendiary Magistrate)/ Executive Magistrate/ Extra Assistant.
 - B. Chief Presidency Magistrate/ Additional Chief Presidency Magistrate/ Presidency Magistrate.
 - C. Revenue Officer not below the rank of Tehsildar.
 - D. Administrator/ Secretary to Administration/ Development Officer. (Lakshadweep and Minicoy Islands)
- 5. The original certificate and self-attested copy for the reserved category, if other than the General Category. For candidate belonging to OBC-Non Creamy Layer will be required to submit the Certificate issued on or later than 1st April 2019 along with (**Annexure "G"**)
- 6. A candidate seeking admission under the physically challenged (PD) category is required to bring original and photo copy of the certificate of Physical Disability issued by Chief Medical Officer of a district/civil surgeon or any Government Hospital authorized to issue such certificates under the provisions of PWD Act 1995. (Annexure "D")
- 7. Work Experience Certificate in original (For PT applicants if not already submitted).
- 8. NOC from current employer in original on the Letter Head of the Employer (for PT applicants if not already submitted). (Annexure "C")
- 9. Self attested Photocopies of all certificates.
- 10. 3 passport size photographs.
- 11. Certificate of Financial Assistance (if applicable).
- 12. Fees in the form of **Demand Draft of Rs. 40,000 in favour of "REGISTRAR, IGDTUW STUDENT FEE S/B ACCOUNT"** payable at Delhi/New Delhi
- 13. In case of married applicants, Affidavit for change of name.
- 14. No TA/DA shall be paid to the Applicants.

Important Note:

- In case an Applicant fails to fulfil the eligibility criteria for admission to Ph.D. Programme as per the Admission Brochure, 2019 of IGDTUW or fails to produce any of the above applicable document, she will not be admitted even if she is selected for Provisional Admission to Ph.D. Programme-2019.
- Those applicants who are seeking provisional admission due to non-declaration of their final year/final semester result, will however have to provide proof of having passed all papers in all the previous examination along with final result by 30th September 2019 to the university otherwise their admission will be treated as null and void (cancelled) and the entire fee will be forfeited. Undertaking is attached at (Annexure "E")



(Formerly Indira Gandhi Institute of Technology)
Kashmere Gate, Delhi-110006

Annexure-A

APPLICATION FORM FOR PROVISIONAL REGISTRATION TO

Ph.D. PROGRAMME-2019

	FEE DETAILS						
Deman	d Draft No Date of Issue:						
Amoun	nt: RsBranch:Branch:						
-	emand Draft should be " in favour of "REGISTRAR, IGDTUW STUDENT FEE S/B ACCOUNT " New Delhi	' payable at					
Note: I	Please read the complete form carefully before filling and attach all the documents st.	as suggested in the					
<u>DETAII</u>	LS ABOUT APPLICANT						
1.	Admission in(Department / Discipline) as						
	(FT/PT/IGDTUW-JRF)	Photograph of					
2.	Name of the Applicant	applicant with					
3.	Application Form No	signature across					
4.	Father's Name:	photo					
5.	Mother's Name:						
6.	Permanent Address:						
	PIN						
	Ph.No. with STD Code:Mobile No						
	Email						
7.	Address for Correspondence:						
	PIN						
	Ph.No. with STD Code:Mobile No						
	Email						
8.	Date of Birth: (dd/mm/year)7. Gender: (Male / Female)						
8.	Category: (GEN/SC/ST/PH) 9. Nationality:						
10.	Details of National Level Examination Qualified: (if any)						
	GATE/CSIR/NET/UGC (if applicable) Score/AIRYearYear						
11.	Source of Financial Assistance (If Any)						

Examination Passed	Degree/ Branch		oard/College/ niversity	Year	%Marks/ CGPA	Division
High School						
Intermediate						
Bachelor						
Master						
Any Other						
Details of Emplo	oyment: (if a	pplicabl	le) in chronologica Designation		of Responsibi	
ngamzauon	FIOIII	10	Designation	ivature	oi kesponsibi	mues
(a) No. of Rese	arch Publicat	tions in	International/Nat			
(a) No. of Rese (b) No. of Conf	arch Publicat	tions in	• •	ence		
a) No. of Rese b) No. of Conf	arch Publicat erence Pape	tions in	International/Nat	ence	Volume, No.	
(a) No. of Rese (b) No. of Conf	arch Publicat erence Pape	tions in	Journal / Confer	ence	Volume, No.	
(a) No. of Rese (b) No. of Conf Author(s) I declare that the form or in the e	Title of P	aper	Journal / Confer	ence RATION and enclose	Volume, No. Page(s)	Year ct. In case a
(a) No. of Rese (b) No. of Conf Author(s) I declare that the form or in the elater stage.	Title of Paper	aper	Journal / Confer	RATION and enclose stand that m	Volume, No. Page(s)	Year ct. In case a shall stand of
(a) No. of Rese (b) No. of Conf Author(s) I declare that the form or in the elater stage.	Title of Paper	aper	Journal / Confer	RATION and enclose stand that m	Volume, No. Page(s) ures are corre y candidature	Year ct. In case a shall stand o
(b) No. of Conf Author(s) I declare that the form or in the elater stage. Place:	Title of Paper	rnished	Journal / Confer	RATION and enclose stand that m Full Signat Name:	Volume, No. Page(s) ures are corre y candidature ure of Applica	ct. In case a shall stand o

......Discipline as.....(FT/PT/IGDTUW-JRF) with Enrollment No

With As proposed Supervisor.

Admission Officer

Annexure-B

FORMAT FOR CASTE CERTIFICATE

(to be submitted by Scheduled Castes/Scheduled Tribes candidates only)

Certified that Ms	,		
daughter of Shri	,		
	, District, is a Castes/Tribes and belongs to		
caste/tribe which	has been recognized as a Scheduled Caste/Tribe vice	de notifica	
			,
Date	Seal		
	Signature of the Revenu	e Officer of	the
	District concerned not below the rai	nk of Tehsil	dar

Annexure-C

FORMAT FOR EMPLOYER'S NO OBJECTION CERTIFICATE

(to be issued on the Letter Head of the Employer)

This	is	to	certi	ify t	hat	Ms							
D/o								wo	rking	;	as		
			in	the	dep	partment	of_						
from_				to_					is	an	employee	of	our
depar	tmen	t/orga	nizatio	on. He	r tota	ıl work ex	perien	ice is	s		Years and		<u> </u>
Month	ns. W	e have	e no o	bjectic	n to	her joinin	g in Ph	n.D (I	Part-	Time	Degree cour	se. Sh	e will
be reli	eved	from	her du	uties as	per	the requir	ement	s of	her D	egre	e Programme	<u>;</u>	
												Signa	ature
											(Head of	Institu	ıtion)

Annexure-D

CERTIFICATE FOR DIFFERENTLY ABLED PERSON (PD)

To be issued by Medical Board from Government Hospital

1.	Name of the cano	lidate: Ms		
2.	Father's Name: _			
3.	Permanent Addre	ess:		
4.	Percentage loss o	f earning capacity (in	words):	
5.			ble to carry on the studies and p	erform the duties
6.	Name of the dise	ase causing handicap	;	
7.	Whether handica	p is temporary or per	rmanent:	
8.	Whether handica	p is progressive or no	on-progressive :	
		•	the engineering studies.	
10	.(Strike out which	ever is not applicable)	
		_	-	_
Me	ember	Member	Principal Medical Officer	
(0	rthopaedic Specia	list)		
Da	ite:		Seal of Office	

NOTE:

- 1. The medical board must have one orthopaedic specialist as its member.
- 2. Candidate having temporary or progressive handicap will not be considered against these seats.



(Formerly Indira Gandhi Institute of Technology) Kashmere Gate, Delhi-110006

Annexure-E

UNDERTAKING FOR RESULT AWAITED APPLICANTS

I		D/o		DO	В
	do understand that m	y result for	M.Tech/ME/M.Sc/	MCA/PG	degree or
equivalent is	s awaited and I have been	n offered pro	visional registration	n as FT/PT	r/IGDTUW-
TRF to the	Ph.D Programme-2019	at IGDTUW	in		
Discipline wi	th Application/Enrolment	No			
I undertake	to submit a copy of m	y result to th	ne Ph.D. Coordinat	or and p	roduce the
original Mar	k sheet for verification la	atest by 30 th	Sept 2019 failing	which my	admission
shall stand c	ancelled and I shall claim	no right what	so ever on the offe	ered Ph.D.	seat.

Signature of the Applicant

Annexure "F"

DOCUMENT CHECKLIST

(Tick \lor the Enclosed Documents. Please enclose original or self attested copies as applicable.)

No.	Tick	Particulars
1		Demand Draft of Rs. 40,000 in favour of "REGISTRAR, IGDTUW STUDENT FEE S/B ACCOUNT" payable at Delhi/New
2		3 Passport Size Photographs
3		Print out of application form duly signed by candidate
4		Original & Self attested copy id proof Aadhar card, Original & Self attested copy of Passport/Driving License/Voter ID/ Pan Card
5		Date of Birth Certificate or the High School (class X) Certificate with Date of Birth.
6		SC/ST/PD certificate (if applicable). Format given below. Annexure "B & Annexure "D"
7		The original certificate and self-attested copy for the reserved category, if other than the General Category. For candidate belonging to OBC-Non Creamy Layer will be required to submit the Certificate issued on or later than 1 st April 2019 as given in Annexure "G"
8		Copies of degrees, Marks/Grade sheets of all the examinations passed.
9		GATE SCORE CARD/ JRF/ NET CERTIFICATE
10		No Objection Certificate from the employer (For Part Time applicants). Annexure "C"
11		Certificate of Financial Assistance (if applicable).
12		Work Experience Certificate (For Part Time Candidates)
13		Undertaking for Result Awaited. Annexure "E" (if applicable)
14		Affidavit (in case of change of name after marriage) (if applicable)
Tota	I	No. of Enclosures:

Annexure -G

UNDERTAKING CUM DECLARATION TO BE GIVEN BY PARENT(s) OF CANDIDATES FOR OBC(NCL) CATEGORY

(An affidavit to be produced on Rs. 100/- stamp paper)

TO WHOMSOEVER IT MAY CONCERN

I, N	Mr./Ms	(father/mother) o	of	havin	g Application.
No	resident o	f village/town/city	y	district	
State h	ereby declare that my	ward belongs to	the	(commu	nity) which is
recogni	zed as a backward class	by the Governmen	nt of Delhi for the	purpose of reservatio	on in PG./Ph.D
Admiss	ions 2019 of IGDTUW D	elhi. I hereby unde	ertake and state that	the OBC (NCL) certi	ficate provided
by my	ward for claiming reserv	vation under OBC	C (NCL) category f	fulfils the eligibility	conditions for
OBC(N	(CL) as per the admission	norms of PG./PH.I	D admissions, 2019.		
	I declare that total family	income of candida	ate (including incom	ne from all the source	es) is fall under
eligibili	ity of NCL-OBC for the	financial year 201	18-19.My family de	tails are given as un	der for further
verifica	tion				
S.No	Name	Occupation	Organisation	PAN No.	
1.					
2.					
3.	List other source of inco	ome (if any)			
					•
I hereby	y declare that the above inf	formation provided	l by me is true to the	best of my knowledg	e.
If any d	liscrepancy is found in the	details, PG./Ph.D	admission Committe	ee has all rights to car	ncel admission
of my w	vard and legal action may	be taken as per nor	ms.		
Place:		-			
Date:.					

Name & Signature of Candidate

Name & Signature of Parent



Indira Gandhi Delhi Technical University For Women

(Formerly Indira Gandhi Institute of Technology) Kashmere Gate, Delhi-110006

Provisional Admission Slip (Office copy)

	·						
Ms/Mr	DO/SO	DO	В		Catego	ory	is
provisionally admi	tted to	the Ph. D	program	in		Disci	oline
as	(FT/PT/IC	GDTUW-JRF)	with Enrollm	nent No			
for Academic S	Session 20)19-20 aga	inst the	fee	deposited	vide	DD
Nodated	dra\	wn on					
Signature of Student	t			Adr	mission Offic	er	
	•••••••	•••••	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	•••••••••	•••••	
(e1)	Indira Gand	hi Delhi Tech	nical Univers	sity For	Women		
	•	ndira Gandhi I			gy)		
	No	shmere Gate	, Deilli-11000	Jo			
	<u>Provision</u>	al Admission	Slip (Studen	t's Copy	<u>/)</u>		
Ms/Mr	DO/SO	DO	В	••••	Catego	ory	is
provisionally admi	tted to	the Ph. D	program	in		Disci	oline
as	(FT/PT/IC	GDTUW-JRF)	with Enrollm	nent No			
for Academic S	Session 20)19-20 aga	inst the	fee	deposited	vide	DD
Nodated	dra\	wn on					

Admission Officer

Signature of Student



Indira Gandhi Delhi Technical University For Women

(Formerly Indira Gandhi Institute of Technology)

Withdrawal Policy for Ph.D Program-2019

Students who are seeking provisional admission due to non-declaration of their final year/final semester result, will however have to provide proof of having passed all papers in all the previous examination along with final result by 30th September 2019 to the University otherwise their admission will be treated as null and void (cancelled) and the entire fee will be forfeited.

Withdrawal policy for Ph.D

If a student chooses to withdraw from the program of study in which she is enrolled, the university shall follow the following four-tier system for the refund of fees remitted by the student.

Sr.	Percentage of refund	Point of time when notice of withdrawal
No	of Aggregate fees*	of admission is served to university
1	100%	15 day or more before the formally- notified last date of admission
2	90%	Less than 15 day before the formally- notified last date of admission
3	80%	15 days or less after the formally- notified last date of admission
4	50%	30 days or less, but more than 15 days after the formally- notified last date of admission
5	00%	More than 30 days after the formally- notified last date of admission

^{*(}Inclusive of course fees and non-tuition fees but exclusive of caution money and security deposit)

In case of (1) in the table above, the university concerned shall deduct an amount not more than 10% of the aggregate fees as processing charges from the refundable amount.



INDIRA GANDHI DELHI TECHNICAL UNIVERSITY FOR WOMEN
(Established by Govt. of NCT of Delhi under Act 9 of 2012)

Kashmere Gate, Delhi-110 006

FORM FOR WITHDRAWAL OF ADMISSION

1). Programme & Instit	ute			
				_
		 		_
4). Address				_
5). Telephone				
				_
9.) Bank Details				
• Name & Relations	hip of the concerned	in favour of whom b	ank transfer is to b	e made
Bank Detail of above	e concerned to be furnis	shed in the given format	:	
Name of the	Address of the	Complete Bank	IFSC CODE OF	
Bank	Bank	Account No.	THE BANK	
		-	•	
	UND	<u>ERTAKING</u>		
We understand and k	now the refund rules o	f the University & agree	to abide by the same	and we
further understand tl	nat the refund would b	e made in due course	of time through bank	transfer
only as per above req	uest.			
(Signature of Pare	nt/Guardian)		(Signature of S	Student)
Date:			Date:	

Compulsory Encl.:

- 1. Admission Slip issued at the time of Admission/Counselling in ORIGINAL
- Cancelled cheque of CBS Bank branch, showing the detail of full bank A/c No.; IFSC code; beneficiary name etc. must be attached by the concerned student along with the Withdrawal Form

Refund amount will directly be transferred in the bank account submitted by the student through electronic mode (ECS/RTGS/ NEFT). Therefore, student may ensure to provide correct details under S. No. 8 & 9 and the required enclosures. University will not be liable for any wrong transfer of amount on account of incorrect bank information provided by the student.