



Assam Rajiv Gandhi University of Cooperative
Management (ARGUCOM)
(A Govt. of Assam University)
Recognised by UGC and member of Association of Indian Universities
2nd floor; Barua Complex, A T Road Sivasagar

APPLICATION FORM FOR PhD PROGRAMME- 2018

APPLICATION NO. (OFFICE USE ONLY)

Affix recent
Coloured
Passport size
photo

Name of the Applicant: _____

Gender: Male Female Third Gender

Category: UR OBC/MOBC SC ST-P ST-H PWD

Date of Birth _____ Nationality: _____

Father's Name: _____

Correspondence
Address _____

Permanent _____
Address _____

Address _____

Mobile No. _____ Email: _____

ACADEMIC RECORD

Name of the Qualifying Examination	Area of Specialization	Year of Passing	University/Institute	% of marks

N.B. In case CGPA system is followed, convert it into percentage of marks to be entered into the column.

Details of marks secured in the examinations other than qualifying examination:

Name of the Graduation Examination	Year of Passing	University/Institute	% of marks

Relevant Examination details:

Exams	Year Appeared	Percentile/Other Score	Discipline chosen	Awards & Scholarships(if any)
GATE/NET				
CSIR-UGC:JRF/LS/SRF				
ARS NET				
ANY OTHER				

Area of interest for research (Mention any 3 broad areas in order of choice):

1. -----
2. -----
3. -----

Provide a brief research proposal stating the rationale for research in the area of interest, reasons for choice, possible contribution to academics & industry from the research (use a separate sheet to write the proposal):

Employment Record:

Name of Employer(s)	Period of Employment	Designation	Nature of Duties

Any other relevant information, which you want to furnish:

Application fee & Demand Draft Details:

a) Name of Bank:
c) Place:

b) Draft No.
d) Date:

List of enclosures: (attach separate sheets if required):

a) Publications:

b) Conferences/Workshops/etc.:

c) Training programmes:

d) NOC from employees (for employed candidate):

e) Mark sheets etc

Declaration:

I hereby declare that I have carefully read the instructions and particulars supplied to me and that the entries made in this application form are correct to the best of my knowledge and belief. If selected for admission, I promise to abide by the rules and discipline of the University.

Place:

Date:

Signature of the Applicant